

P2000094353

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : DOCUMENT PLANET INC
Account Number : I20180000095
Phone : (305)510-3848
Fax Number : (786)789-2416

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: INFO@DOCUMENTPLANETINC.COM

FLORIDA PROFIT/NON PROFIT CORPORATION
AB & Y INC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

FILED
TALLAHASSEE, FLORIDA

2020 NOV 30 AM 9:42

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: CASTILLO AB & Y INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
9044 HICKORY CIRCLE
TAMPA, FL 33615

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ALL LAWFUL BUISNESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: YARDO M CASTILLO NAVARRO (P)

Name and Title:

Address

9044 HICKORY CIRCLE

Address:

TAMPA, FL 33615

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: DOCUMENT PLANET INC.COM

Address: 4167 NW 135 STREET

OPA LOCKA FL 33054

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: YARDO M CASTILLO NAVARRO

Address: 9044 HICKORY CIRCLE

TAMPA FL 33615

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Onerrira Pou

Required Signature/Registered Agent

12/03/2020

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Yardo M Castillo Navarro

Required Signature/Incorporator

12/03/2020

Date

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