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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	

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J. FASON JAN 04 2021



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## CORPORATE

When you need ACCESS to the world

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INC.

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3.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

		V	ALKIN			
	PIC	CK UP:	12/30/2020			
<u> </u>	CERTIFIED COPY					
X.	РНОТОСОРУ			<del>.</del>		
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l. •	12 <sup>TH</sup> AVE CONTRACT (CORPORATE NAME AND DOC)			·		
3.	(CORPORATE NAME AND DOC					
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PECI. NSTR	AL UCTIONS:					
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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 corpora	2 12th Ave Contractors, In ation shall be:	oc.	
ARTICLE II PRING		Mailing	g address, if different is:
Naples, FL 34120		<del>-</del>	
ARTICLE III PURPO The purpose for which	OSE the corporation is organized is:	ting any and all lawful busines	s.
RTICLE IV SHAR he number of shares of	stock is:		2020 DEC 30
	L OFFICERS AND/OR DIRECTORS Justin Narine, DPST	Name and Title:	P 4 12
Address	1121 12th Ave NE	Address:	47
	Naples, FL 34120		
Name and Title:		Name and Title:	
Address			
Name and Title:		Name and Title:	
Address			<u> </u>
		<del>-</del>	

Name a	nd Title:	Name and Title:	
Addres		Address:	
ARTICLE VI	REGISTERED AGENT		
Name:	Florida street address (P.O. Box NOT acceptab Jeff Novatt, Esq.	ic) of the registered agent is:	
Address:	1415 Panther Lane, Suite 327		
	Naples, FL 34109		2020 DEC
ARTICLE VII	INCORPORATOR		DEC 30
The name and a	ddress of the Incorporator is:		
Name:	Jeff Novatt, Esq.		7.17 PM 12: 4
Address:	1415 Panther Lane, Suite 327		1-1-1
	Naples, FL 34109	<del></del>	
Effective date, if (If an effective of filing.)  Note: If the date	EFFECTIVE DATE: Tother than the date of filing:  date is listed, the date must be specific and can be inserted in this block does not meet the applicate effective date on the Department of State's reconstruction.	able statutory filing requirement	rior or 90 days after the
Having been nat this certificate, I	med as registered agent to accept service of pro am familiar with and accept the appointment as Required Signature/Registered Agent	s registered agent and agree to a	ration at the place designated in act in this capacity  12/29/2020
l submit this doc document to the	Required Signature/Registered Agent cument and affirm that the facts stated herein Department of State constitutes a third degree for	ure irue. I am aware inai ine i	Date  Salse information submitted in a second secon
Requi	ired Signature/Incorporator	Esp.	12/29/2020
ixoqu.	neworghature/fricorporator	$\boldsymbol{\nu}$	/ Date