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(Requestor's Name)

(Address)

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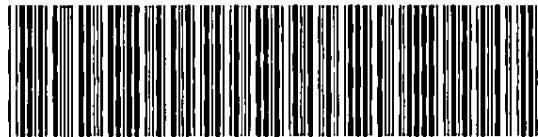
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_



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02/01/21 -01020--005 • 70.00

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2021 FEB -1 PM 12:41  
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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

## ALONSO CARPENTRY INC

Art of Inc. File \_\_\_\_\_  
LTD Partnership File \_\_\_\_\_  
Foreign Corp. File \_\_\_\_\_  
L.C. File \_\_\_\_\_  
Fictitious Name File \_\_\_\_\_  
Trade/Service Mark \_\_\_\_\_  
Merger File \_\_\_\_\_  
Art. of Amend. File \_\_\_\_\_  
RA Resignation \_\_\_\_\_  
Dissolution / Withdrawal \_\_\_\_\_  
Annual Report / Reinstatement \_\_\_\_\_  
Cert. Copy \_\_\_\_\_  
Photo Copy \_\_\_\_\_  
Certificate of Good Standing \_\_\_\_\_  
Certificate of Status \_\_\_\_\_  
Certificate of Fictitious Name \_\_\_\_\_  
Corp Record Search \_\_\_\_\_  
Officer Search \_\_\_\_\_  
Fictitious Search \_\_\_\_\_  
Fictitious Owner Search \_\_\_\_\_  
Vehicle Search \_\_\_\_\_  
Driving Record \_\_\_\_\_  
UCC 1 or 3 File \_\_\_\_\_  
UCC 11 Search \_\_\_\_\_  
UCC 11 Retrieval \_\_\_\_\_  
Courier \_\_\_\_\_

Signature

Requested by: SETH

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Name \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Walk-In \_\_\_\_\_ Will Pick Up \_\_\_\_\_

## COVER LETTER

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** ALONSO CARPENTRY INC  
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00       \$78.75  
Filing Fee      Filing Fee  
                  & Certificate of Status

\$78.75       \$87.50  
Filing Fee      Filing Fee,  
                  & Certified Copy      Certified Copy  
                  & Certificate of      & Certificate of  
                  Status      Status

**ADDITIONAL COPY REQUIRED**

**FROM:** MARIA E RUIZ  
Name (Printed or typed)  
7750 SW 117TH AVE SUITE 203  
Address  
MIAMI FLORIDA 33183  
City, State & Zip  
305 595-2407  
Daytime Telephone number  
MARIAQUIROS9@HOTMAIL.COM  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

**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: ALONSO CARPENTRY INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
18177 SW 154 COURT

Mailing address, if different is:  
7750 SW 117TH AVE SUITE 203

MIAMI FLORIDA 33187

MIAMI FLORIDA 33183

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LEGAL PURPOSES

**ARTICLE IV SHARES**

The number of shares of stock is: 100 @ \$1.00 EA

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: YASER ALONSO PALAU, PRES

Name and Title: \_\_\_\_\_

Address: 18177 SW 154 COURT

Address: \_\_\_\_\_

MIAMI FLORIDA 33187

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

301 FEB - PM 12:42  
REC'D -  
P.M. -  
S. STATE  
TEN

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: YASER ALONSO PALAU  
Address: 18177 SW 154 COURT  
MIAMI FLORIDA 33187

2391 FEB - 1 PM 12:42

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: YASER ALONSO PALAU  
Address: 18177 SW 154 COURT  
              MIAMI FLORIDA 33187

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 02/02/2021 (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.*

John S. Gil

01/31/2021

**Required Signature/Registered Agent**

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 § 812.155, E.S.*

*John S. Palmer*  
Required Signature/Incorporator

01/31/2021

Date