## 210000 36067

(Red	uestor's Name)		
(Add	lress)		
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(Спу	/State/Zip/Phone	· #)	
☐ PICK-UP	☐ WAIT	MAIL	
(Bus	iness Entity Nam	ne)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer			





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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

	_ <del></del>	<del></del>
STONE TABLE PRO	PERTY HOLDINGS	
CORP		
		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
Signature		Fictitious Owner Search
		Vehicle Search
		Driving Record
Requested by: SETH 04/22/21		UCC ) or 3 File
Name $04/22/21$ Date Time	UCC 11 Search	
	Date Hine	UCC 11 Retrieval
Walk-In	Will Pick Up	Courier

## **COVER LETTER**

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

SUBJECT: STONE	TABLE PROPERTY HOLDIN	IGS CORP.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	l a check for:
☑ \$70.00 Filing Fee	☐ \$78.75 Filing Fce & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of
		ADDITIONAL CO	Status
FROM: HE	ERSKOWITZ SHAPIRO PLI	_C	
<del></del> -	Name	e (Printed or typed)	
91	30 S. DADELAND BLVD., S	SUITE 1609	
		Address	
MI	AMI, FLORIDA 33156		
	City,	State & Zip	
30	5-423-1259		
	Daytime 1	elephone number	
gre	eg@hslawfl.com		
	É-mail address: (to be use	d 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)

	CIPAL OFFICE Principal <u>street</u> address	N	failing address, if different is:
45 Collins Avenue, #1728	· -		<u>,</u>
INY ISLES BEACH, FL. 3:	3160		
TICLE III PURPO	OSE  The corporation is organized is: REAL ESTA	ATE HOLDINGS	
			26
	<u> </u>		762 AF
			22
RTICLE IV SHAF e number of shares o	RES f stock is: 100		SHI: 32
	AL OFFICERS AND/OR DIRECTORS  ALEJANDRO PIEDRAHITA BORRERO / PRESIDENT	Name and Title	CATALINA MESA RAMIREZ / VICE-PRESIDENT
Name and Title:CAL Address	ON LE 00 A SUB #004 407	Address:	CALLE 20 A SUR #22A 197
	EDIFICIO GUADAL DE AVINON APTO 202	_	EDIFICIO GUADAL DE AVINON APTO 2
	MEDELLIN, COLOMBIA		MEDELLIN, COLOMBIA
		_	
Name and Titl	e:	Name and Title	:
Name and Titl			
	e:		
Address	e:	Address: 	
Address	e:	Address:  Name and Titl	

Name and	l Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	
The name and Fl	orida street address (P.O. Box NOT acceptable) of t	the registered agent is:
Name:	HERSKOWTZ SHAPIRO PLLC	
Address:	9130 S. DADELAND BLVD., SUITE 1609	
	MIAMI, FLORIDA 33156	
ARTICLE VII	INCORPORATOR	
The name and a	ddress of the Incorporator is:	
Name:	HERSKOWTZ SHAPIRO PLLC	
Address:	9130 S. DADELAND BLVD., SUITE 1609	
	MIAMI, FLORIDA 33156	
ARTICLE VIII	EFFECTIVE DATE:	(OPTION LAL)
Effective date, if (If an effective of filing.)	f other than the date of filing:	t be more than five days prior or 90 days after the
Note: If the date the document's	e inserted in this block does not meet the applicable effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as
Having been na	med as registered agent to accept service of process for familiar with and accept the appointment as register	or the above stated corporation at the place designated in this red agent and agree to act in this capacity
cerujicule, 1 um	Juniari Wall and accept in July 10 minutes 10 % store	
		4/22/21
	Required Signature Registered Agent	Date
I submit this do		true. I am aware that the false information submitted in a sy as provided for in s.817.155, F.S.
Required Signa	ture/Incorporator	Date 4122/21

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