

H21000380826

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : AT PLUS CORP
Account Number : I20140000060
Phone : (305)406-3800
Fax Number : (305)406-3999

2021 OCT 12 AM 9:21

12:12 **Enter the email address for this business entity to be used for future
annual report mailings. Enter only one email address please.**

12:12 Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
A.C. REMODELING & REPAIR INC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

OCT 13 2021

1. SCON

AFFIDAVIT

BEFORE ME, the undersigned authority, on this day personally appeared, who after being firstly duly sworn, under oath, deposes and says:

1. The undersigned is also the sole Director and the President of **A.C. REMODELING & REPAIR INC**, a Florida corporation to be filed with the Florida Department of State on or about **October 12, 2021**.
2. The undersigned hereby consents to and authorizes the use by **A.C. REMODELING & REPAIR INC**, of the name **A.C. REMODELING & REPAIR INC**.
3. The undersigned has personal knowledge of the fact and matter set forth herein and therefore has no intentions of reinstating the dissolved entity.

FURTHER AFFIANT SAYETH NAUGHT.

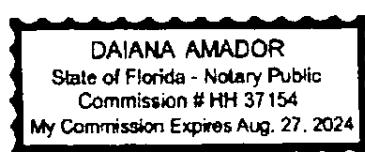
STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

NET-GO CRIMES

PERSONALLY appeared before me, ALFREDO CASTILLO, who is personally known to me, who being by my first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

Witness my hand and official seal this 12th day of October, 2021

Dee R. Dill
Notary Public Signature



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: A.C. Remodeling & Repair Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
5181 W. Oakland Park Blvd
Apt Q309
Mailing address, if different is:
Fort Lauderdale, FL 33313

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Remodeling & Repairs to
residential and commercial Properties

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Alfredo Castillo /President Name and Title: _____

Address: 5181 W. Oakland Park Blvd Address: _____

Fort Lauderdale, FL 33313

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

2021 OCT 12

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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: Alfredo Castillo
Address: 5181 W Oakland Park Blvd # Q309
Fort Lauderdale, FL 33313

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Alfredo Castillo
Address: 5181 W. Oakland Park Blvd # Q309
Fort Lauderdale, FL 33313

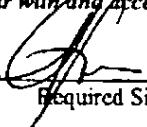
ARTICLE VIII EFFECTIVE DATE:

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

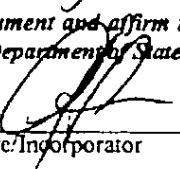


Required Signature/Registered Agent

10/04/2021

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.



Required Signature/Incorporator

10/04/2021

Date