Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210004380673)))



H210004380673ABC+

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I2000000146 Phone : (305)444-4994

Fax Number : (305)328-4774

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

Email Ad	dress:	

## FLORIDA PROFIT/NON PROFIT CORPORATION CONSTRUCTIONS NVA 2021 CORP

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

iii

Page: 3 of 4 2021-12-01 15:32:06 GMT 13053284774 From: Yanet Avila To: +18506176387

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

RTICLE II PRI	ALCON IT GUILLE		
VICEEII IN	NCIPAL OFFICE Principal street address	Mailing	address, if different is:
			address, it write: ent is.
7400 WEST FLAGL	ER ST	<u></u>	· •• • · · · · · · · · · · · · · · · ·
MIAMI, FL 33144			
RTICLE III PUI	RPOSE		
he purpose for whic	th the corporation is organized is: AN	Y AND ALL LAWFUL BUSINESS	
			<del>/////////////////////////////////////</del>
			·
			<i>;</i>
		****	
			<del> </del>
			·
ARTICLE IV SHARES The number of shares of stock is: 100			: 7
he number of shares	OT STOCK IS: 100		
he number of shares	OT STOCK IS: 100	·········	). S: C
		<u>85</u>	2:04
RTICLE V INT	TIAL OFFICERS AND/OR DIRECTOR		ŷ.
Name and T	TIAL OFFICERS AND/OR DIRECTOL Title: NATHALIE T. NOGUERA DE SORI	ANO (P/TName and Title:	ŷ.
RTICLE V INT	TIAL OFFICERS AND/OR DIRECTOL Title: NATHALIE T. NOGUERA DE SORI		ŷ.
Name and T	TIAL OFFICERS AND/OR DIRECTOL Title: NATHALIE T. NOGUERA DE SORI	ANO (P/TName and Title:	ŷ.
Name and T	TIAL OFFICERS AND/OR DIRECTOR Title: NATHALIE T. NOGUERA DE SORI	ANO (P/TName and Title:	ŷ.
Name and T	TIAL OFFICERS AND/OR DIRECTOR Title: NATHALIE T. NOGUERA DE SORI	ANO (P/TName and Title:	ŷ.
Name and T Address	TIAL OFFICERS AND/OR DIRECTOR Title: NATHALIE T. NOGUERA DE SORI	ANO (P/T)Name and Title: Address:	0¢
Name and T Address Name and T	TIAL OFFICERS AND/OR DIRECTOR Title: NATHALIE T. NOGUERA DE SORI 7400 WEST FLAGLER ST MIAMI, FL 33144  itle: ALEX C. SORIANO (VP-S)	ANO (P/TName and Title: Address:	0¢
Name and T Address	TIAL OFFICERS AND/OR DIRECTOR Title: NATHALIE T. NOGUERA DE SORI 7400 WEST FLAGLER ST MIAMI, FL 33144  Stle: ALEX C. SORIANO (VP-S) 7400 WEST FLAGLER ST	ANO (P/T)Name and Title: Address:	0¢
Name and T Address Name and T	TIAL OFFICERS AND/OR DIRECTOR Title: NATHALIE T. NOGUERA DE SORI 7400 WEST FLAGLER ST MIAMI, FL 33144  itle: ALEX C. SORIANO (VP-S)	ANO (P/TName and Title: Address:	0¢
Name and T Address Name and T	TIAL OFFICERS AND/OR DIRECTOR Title: NATHALIE T. NOGUERA DE SORI 7400 WEST FLAGLER ST MIAMI, FL 33144  Stle: ALEX C. SORIANO (VP-S) 7400 WEST FLAGLER ST	ANO (P/TName and Title: Address:	0¢
Name and T Address Name and T	TIAL OFFICERS AND/OR DIRECTOR Title: NATHALIE T. NOGUERA DE SORI 7400 WEST FLAGLER ST MIAMI, FL 33144  Stle: ALEX C. SORIANO (VP-S) 7400 WEST FLAGLER ST	ANO (P/TName and Title: Address:	0¢
Name and To Address Name and To Address	TIAL OFFICERS AND/OR DIRECTOR Title: NATHALIE T. NOGUERA DE SORI 7400 WEST FLAGLER ST MIAMI, FL 33144  Stle: ALEX C. SORIANO (VP-S) 7400 WEST FLAGLER ST	ANO (P/T)Name and Title:  Address:  Name and Title:  Address:	0 <b>¢</b>
Name and To Address  Name and To Address  Name and To Address	TIAL OFFICERS AND/OR DIRECTOR TITLE: NATHALIE T, NOGUERA DE SORI 7400 WEST FLAGLER ST MIAMI, FL 33144  INC. SORIANO (VP-S) 7400 WEST FLAGLER ST MIAMI, FL 33144	ANO (P/T)Name and Title:  Address:  Name and Title:  Address:  Name and Title:	0 <b>4</b>
Name and To Address Name and To Address	TIAL OFFICERS AND/OR DIRECTOR TITLE: NATHALIE T, NOGUERA DE SORI  7400 WEST FLAGLER ST  MIAMI, FL 33144  Itle: ALEX C, SORIANO (VP-S)  7400 WEST FLAGLER ST  MIAMI, FL 33144	ANO (P/T)Name and Title:  Address:  Name and Title:  Address:  Name and Title:	0 <b>¢</b>

Page: 4 of 4

Name and Title:		Name and Title:		
Address		Address:		
	REGISTERED AGENT orida street address (P.O. Box NOT acce	entable) of the registerral warm is:		
Name:	FERNANDEZ - BERGNES & ASSOCIA			
Address:	7400 WEST FLAGLER ST			
	MIAMI, FL 33144			
ARTICLE VII	<u>INCORPORATOR</u>	7071 DEC -1 PH 2: 04		
The <u>name and ac</u>	Idress of the Incorporator is:	$\frac{1}{6}$		
Name:	CARMEN M. PETERS, CPA	PH 3	Ç	
Address:	7400 WEST FLAGLER ST	<u>~</u>		
	MIAMI, FL 33144	<b></b>		
Effective date, if (If an effective d filling.)  Note: If the date	·	nd cannot be more than five days prior or 90 days after the applicable statutory filing requirements, this date will not be listed as		
		process for the above stated corporation at the place designated in this is registered agent and agree to act in this capacity	š	
	and the	5,c <b>(%</b> 11/29/2021		
-	Required Signature/Registered A	geni Date		
		ercin are true. I am aware that the false information submitted in a gree felony as provided for in s.817.155, F.S.	ı	
Carro Do CEA		11/29/2021		
Required Signatu	fe/Incorporator I (	Date		