## 12000044327

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

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300388717 TALLAHASSEE, FL.

06/01/22--01006--023 \*\*70.00



## CAPITAL CONNECTION, INC.

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

		<u> </u>		
THUNDER ROOFING	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
			ı ——	Annual Report / Reinstatement
				Cert. Copy
				Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
			<del></del>	Corp Record Search
				Officer Search
				Fictitious Search
Signature		<del></del>	<u> </u>	Fictitious Owner Search
- G				Vehicle Search
<u> </u>	· <del></del>	<del>_</del>		Driving Record
Requested by: SETH	06/03			UCC   or 3 File
Name	Date	Time	<u> </u>	UCC 11 Search
runte				UCC 11 Retrieval
Walk-In Thom style GA Arts	Will Pick Up			Courier

## **COVER LETTER**

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

SUBJECT: THUN	DER ROOFING INC		
<del></del>	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original	ginal and one (1) copy of the arti	cles of incorporation and	la check for:
□ \$70.00	□ S78.75	\$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
1 milg rec	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of
		ADDITIONAL CO	Status PPY REQUIRED
FROM: Be	estax Accounting Inc Name	(Printed or typed)	
67	26 N STATE ROAD 7		
<del></del> _	/	Address	
Co	conut Creek, FL 33073		
	City,	State & Zip	
95	4-969-9992		
	Daytime T	elephone number	
info	@bestaxaccounting.com		
	E-mail address: (to be used	for future annual report n	otification)

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



June 2, 2022

CAPITAL CONNECTION

SUBJECT: THUNDER ROOFING INC

Ref. Number: W22000072351

We have received your document for THUNDER ROOFING INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

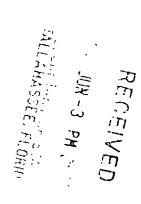
Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist III

Letter Number: 722A00012380



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

	E ration shall be: THUNDER ROOFING		
ARTICLE II PRIM 6102 NW 20TH STREET	VCIPAL OFFICE Principal <u>street</u> address	Ma	tiling address, if different is:
MARGATE FL 33063			
ARTICLE III PUR.	POSE at the corporation is organized is: Any and	l all legal purpose.	
			2022 JUN SEURLIN
			JUN -3 PH 12: 45
			3 P
			F. 75.
	n.c.c		ˈ == ŭ
The number of shares of	<u>RES</u> of stock is: 500 shares@ \$1.00 par va	lue	
ARTICLE V INIT	IAL OFFICERS AND/OR DIRECTORS	<del></del>	
	IAL OFFICERS AND/OR DIRECTORS Ile: Oscar Santiago Serrano - Presid	dent <sub>Name</sub> and Title:	
Name and Ti	<sub>Ile:</sub> Oscar Santiago Serrano - Presid		
Name and Ti	MARGATE, FL 33063		
Name and Tir Address Name and Titl	MARGATE, FL 33063  c: Mayra Arcos - Vice President	Address:  Name and Title:	
Name and Ti	MARGATE, FL 33063  6102 NW 20TH STREET  MARGATE, FL 33063  e: Mayra Arcos - Vice President  6102 NW 20TH STREET	Address:  Name and Title:  Address:	
Name and Tir Address Name and Titl	MARGATE, FL 33063  c: Mayra Arcos - Vice President	Address:  Name and Title:  Address:	
Name and Tir Address Name and Titl Address	MARGATE, FL 33063  MARGATE, FL 33063  Mayra Arcos - Vice President 6102 NW 20TH STREET  MARGATE, FL 33063	Address:  Name and Title:  Address:	
Name and Titl Address  Name and Titl Address	MARGATE, FL 33063  MARGATE, FL 33063  C: Mayra Arcos - Vice President  MARGATE, FL 33063	Address:  Name and Title:  Address:  Name and Title:	
Name and Tir Address Name and Titl Address	MARGATE, FL 33063  MARGATE, FL 33063  Mayra Arcos - Vice President 6102 NW 20TH STREET  MARGATE, FL 33063	Address:  Name and Title:  Address:  Name and Title:	

Name:	and Title:	Name and Title:
Λddro	·ss	Address:
	REGISTERED AGENT	
The <u>name and</u>	Florida street address (P.O. Box NOT acco	otable) of the registered agent is:
Nanie:	Mayra Arcos	
Address:	6102 NW 20TH STREET	022 J
	MARGATE, FL 33063	SECALLAHA
<u>ARTICLE VII</u>	INCORPORATOR	7 1 L. L. L. 45
The name and	address of the Incorporator is:	2
Name:	Bestax Accounting Inc	<b>5</b>
Address:	6726 N STATE ROAD 7	
	Coconut Creek, FL 33073	<del></del>
Effective date,	I EFFECTIVE DATE: if other than the date of filing: 05/25/202 date is listed, the date must be specific a	2 (OPTIONAL) Id cannot be more than five days prior or 90 days after the
filing.)	·	
	ne inserted in this block does not meet the a seffective date on the Department of State's	oplicable statutory filing requirements, this date will not be list records.
		process for the above stated corporation at the place designated strength registered agent and agree to act in this capacity
Mayra Arcos	S	05/26/2022
-	Required Signature/Registered A	ent Date