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**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**1 ALL DADE GENERAL CONSTRUCTION INC**

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**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: 1 ALL DADE GENERAL CONSTRUCTION INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

5417 SW 134 PLMIAMI, FL 33175**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: HARRY CARRASQUILLO (P)

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

Address 5417 SW 134 PL

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

MIAMI, FL 33175

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

2022 JUL -6 PM 1:40  
ALL DADE GENERAL CONSTRUCTION INC  
HARRY CARRASQUILLO (P)

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: HARRY CARRASQUILLOAddress: 5417 SW 134 PLMIAMI, FL 33175**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: HARRY CARRASQUILLOAddress: 5417 SW 134 PLMIAMI, FL 33175**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*/s/ Harry Carrasquillo  
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 s.817.155, F.S.*/s/ Harry Carrasquillo  
Required Signature/Incorporator

Date \_\_\_\_\_