

PA220000090730

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

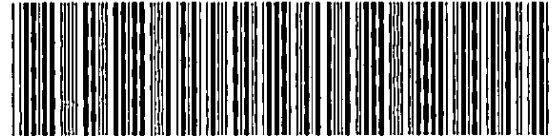
(Business Entity Name)

(Document Number)

c Copies _____ Certificates of Status _____

al Instructions to Filing Officer

Office Use Only



300398471623

Handwritten signature and date 12/19/22

12/09/22--01005--003 **87.50

RECEIVED
2022 DEC -9 AM 9:02
ALLAHASSEE, FLORIDA
FILED
2022 DEC -9 AM 6:26
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: MUELBY CONSTRUCTION & CONCRETE SERVICES INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: MICHAEL MOSS
Name (Printed or typed)
789 SW FEDERAL HWY, STE 201
Address
STUART FL 34994
City, State & Zip
561-376-7614
Daytime Telephone number
MuelbyConstruction@gmail.com
E-mail address: (to be used for future annual report notification)

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

SECRETARY OF STATE
TALLAHASSEE, FL

2022 DEC -9 AM 6:26

FILED

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: MUELBY CONSTRUCTION & CONCRETE SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
789 SW FEDERAL HWY, STE 201
STUART, FL 34994

Mailing address, if different is:
(same)

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: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: NANNY HERNANDEZ ABASCAL

Name and Title:

Address: PRESIDENT

Address:

4890 WEST FLAGLER ST. APT 3

MIAMI FL 33134

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

FILED
2022 DEC -9 AM 6:26
SECRETARY OF STATE
TALLAHASSEE, FL

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: MICHAEL MOSS

Address: 789 SW FEDERAL HWY, STE 201

STUART FL 34994

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MICHAEL MOSS

Address: 789 SW FEDERAL HWY, STE 201

STUART FL 34994

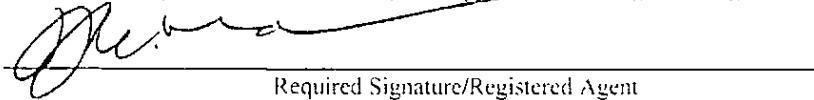
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 12-02-2022, (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.)

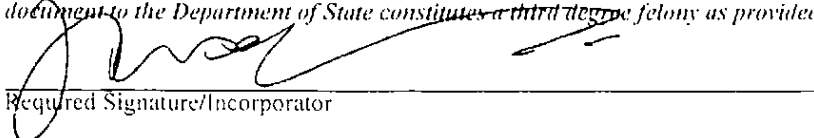
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

12/02/2022
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

12/02/2022
Date

FILED
2022 DEC -9 AM 6:26
SECRETARY OF STATE
TALLAHASSEE, FL