## Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : TAP SOLUTIONS INC

Account Number : I20210000103

Phone : (786)615-3057 Fax Number : (786)615-3058

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

## FLORIDA PROFIT/NON PROFIT CORPORATION E & N DRYWALL CORP

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Corporate Filing Menu

Help



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

name of the corpor	CID-L OFFICE			
<u>TCLE II PRIN</u>	Principal street address	<i>i</i> V	Mailing address, if different is:	
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Name an	d Title:	Name and Title:	
Address		Address:	
		<u> </u>	
ARTICLE VI The name and Fi	REGISTERED AGENT orida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	TAP SOLUTIONS INC	5 5	
Address:	2341 NW 7TH ST	<del></del> -	
	MIAMI, FL 33125		. 20
ARTICLE VII	<u>INCORPORATOR</u>		TALLAHASSEE,
The name and ad	ldress of the Incorporator is:		FILL FEB 27 A
Name:	EDDY A ARAUZ DURON	<del></del>	SSE
Address:	500 NW 23RD CT APT 3	<del>_</del>	AM 1: 10 OF STATE SSEE, FL
	MIAMI, FL 33125	<del></del>	TATE
Effective date, if (If an effective d filing.)  Note: If the date	EFFECTIVE DATE: other than the date of filing: ate is listed, the date must be specific and can inserted in this block does not meet the applicab ffective date on the Department of State's record	not be more than five days prior or solestands.  Ile statutory filing requirements, this day	
	ned as registered agent to accept service of process amiliar with and accept the appointment as regist Required Signature/Registered Agent	ered agent and agree to act in this capa	
	ument and affirm that the facts stated herein w Department of State constitutes a third degree felo		rmation submitted in a
Required Signatu	<u>·</u>		2/27/23