

P23000041314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

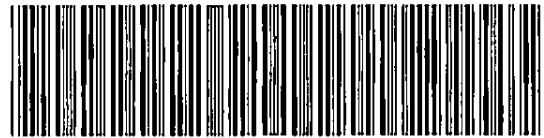
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 MAY 17 PM 4:28
CLERK OF STATE
TALLAHASSEE, FL

FILED

W23000060277

W23000044626

85

COVER LETTER

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

SUBJECT: EL SHADAY PAVERS, 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 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

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

FROM: Paulo Rodrigues
Name (Printed or typed)
4175 NW 59th Street
Address
Coconut Creek, FL 33073
City, State & Zip
(754) 273-3252
Daytime Telephone number
rod65.paulo@gmail.com
E-mail address: (to be used for future annual report notification)

2023 MAY 17 PM 4:28
DEPT. OF STATE
TALLAHASSEE, FL

FILED

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 25, 2023

PAULO RODRIGUES

4175 NW 59TH STREET
COCONUT CREEK, FL 33073 US

SUBJECT: EL SHADAY PAVERS, INC.
Ref. Number: W23000060277

RECEIVED
2023 MAY 17 PM 2:21
DIVISION OF CORPORATIONS
COMMERCIAL
SERVICES

We have received your document for EL SHADAY PAVERS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The number of shares of authorized stock can not be 0.

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.

Dil Sultana
Regulatory Specialist II

Letter Number: 323A0000926

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DIVISION OF STATE
1/11 SHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 3, 2023

PAULO RODRIGUEZ
4175 NW 59TH STREET
COCONUT CREEK, FL 33073 US

SUBJECT: EL SHADAY PAVERS, INC.
Ref. Number: W23000044626

RECEIVED
2023 APR 21 AM 11:11
CORPORATIONS
COMMERCIAL
SERVICES

We have received your document for EL SHADAY PAVERS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

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.

Dil Sultana
Regulatory Specialist II

Letter Number: 223A00007531

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2023 MAY 17 PM 4:29
TALLAHASSEE, FL
STATE

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

The name of the corporation shall be: EL SHADAY PAVERS, INC.

Principal street address

Mailing address, if different is:

4175 NW 59 ST

Coconut Creek, FL 33073

The purpose for which the corporation is organized is:

Provide quality workmanship through each requested project, whether a sidewalk, pool, deck, driveway, etc. Expand services where needed.

The number of shares of stock is: 100

Name and Title: Paulo Rodrigues Name and Title: _____

Address: CEO/PD57 Address: 2

4175 NW 59 ST
Coconut Creek, FL 33073

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____

Address _____ Address: _____

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2023 MAY 17 PM 4:29
CLERK OF DISTRICT COURT
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: Paulo Rodrigues
Address: 4175 NW 59 ST
Coconut Creek, FL 33073

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Paulo Rodrigues
Address: 4175 NW 59 ST
Coconut Creek, FL 33073

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.

Paulo Rodrigues

Required Signature/Registered Agent

03/06/2023
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.

Paulo Rodrigues

Required Signature/Incorporator

03/06/2023
Date

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DEPT. OF STATE
TALLAHASSEE, FL