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Division of Corporations
Florida Department of State
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FLORIDA PROFIT/NON PROFIT CORPORATION
AGA DRYWALL & SHEETROCK INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

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FEB 23 2024
TALLAHASSEE
FLORIDA
SECRETARY OF STATE

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: AGA DRYWALL & SHEETROCK INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
2779 SUNNYSIDE ST.
JACKSONVILLE, FL 32250

Mailing address, if different is:
2779 SUNNYSIDE ST.
JACKSONVILLE, FL 32250

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: SHARES: 100 @ \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ADENEY GARCIA ARANTON - P
Address 2779 SUNNYSIDE ST.
JACKSONVILLE, FL 32250

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

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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: ADENEY GARCIA ARANTON
Address: 2779 SUNNYSIDE ST.
JACKSONVILLE, FL 32250

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ADENEY GARCIA ARANTON
Address: 2779 SUNNYSIDE ST.
JACKSONVILLE, FL 32250

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/ Adeney Garcia Aranton

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/ Adeney Garcia Aranton

Required Signature/Incorporator

Date

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