

P24000097895

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : ATESIANO TAX SERVICES
Account Number : I20190000123
Phone : (305)928-1137
Fax Number : (786)349-4952

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TALLAHASSEE, FLORIDA

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Omartriana1308@yahoo.com

FLORIDA PROFIT/NON PROFIT CORPORATION

TRIANA REMODELING INC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

Apr. 22, 2024 4:54PM

No. 1027 P. 4

FLORIDA DEPT OF STATE
Division of Corporation

04/03/2024

Subj. TRIANA REMODELING INC

To whom it may concern:

This letter of name release is for entity name regarding document #P19000086220 in association with the entity's admin dissolution. I have no intention of reinstating; therefore, you may release "TRIANA REMODELING INC" for use to another Florida entity.

Kind Regards,



Omar Trlana
President

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: TRIANA REMODELING INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
7040 SW 24 ST
APT 111

Mailing address, if different is:
SAME

MIAMI FL 33155

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business

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ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: OMAR TRIANA, President Name and Title: _____

Address: 7040 SW 24 ST, APT 111 Address: _____

MIAMI FL 33155

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: OMAR TRIANA
Address: 7040 SW 24 ST APT 111
MIAMI FL 33155

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: OMAR TRIANA
Address: 7040 SW 24 ST APT 111
MIAMI FL 33155

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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

Omari Triana 04/03/2024
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.

Omari Triana 04/03/2024
Required Signature/Incorporator Date