

Florida Department of State

Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION
BROTHERS N.C. CONSTRUCTION, CORP

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

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

ARTICLE I NAMEThe name of the corporation shall be: BROTHERS N.C. CONSTRUCTION, CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address302 NW 53 AVE
MIAMI, FL 33126

Mailing address, if different is:

302 NW 53 AVE
MIAMI, FL 33126**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: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ANNER EDDYCKSON CENTENO ARCIAName and Title: NORVIN ARCE PERALTAAddress: PRESIDENTAddress: VIC-PRESIDENT302 NW 53 AVE302 NW 53 AVEMIAMI, FL 33126MIAMI, FL 33126

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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TALLAHASSEE, FL

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: ANNER EDDYCKSON CENTENO ARCIA
Address: 302 NW 53 AVE
MIAMI, FL 33126

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: ANNER EDDYCKSON CENTENO ARCIA
Address: 302 NW 53 AVE
MIAMI, FL 33126

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.

x Anna Centeno
Required Signature/Registered Agent

08/30/2024
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.

x Anna Centeno x [Signature]
Required Signature/Incorporator

08/30/2024
Date

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