

PH4000078177

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

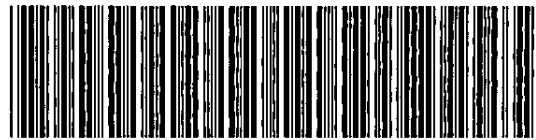
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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09/19/14--01005--008 \*\*78.75

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14 SEP 19 PM 2:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MD 9/22

**COVER LETTER**

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

**SUBJECT: APCSPACES 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: Carlos Casado**

Name (Printed or typed)

**10700 NW 66th Street, #110**

Address

**Miami, FL 33178**

City, State & Zip

**305-807-2423**

Daytime Telephone number

**cc@apcspaces.com**

E-mail address: (to be used for future annual report notification)

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

**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: APCSPACES INC

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address: 10700 NW 66th Street, #110  
Miami, FL 33178  
Mailing address, if different is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is: To provide consulting services for Interior Decor Projects & Remodels, as well as sell and re-sell furnishings

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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CLERK OF DISTRICT COURT  
MIAMI COUNTY FLORIDA

**ARTICLE IV SHARES**  
The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:	<u>Carlos Casado</u>	Name and Title:	<u>Adriana Casado</u>
Address	<u>10700 NW 66th St, #110</u> <u>Miami, FL 33178</u>	Address:	<u>10700 NW 66th St, #110</u> <u>Miami, FL 33178</u>
_____	_____	_____	_____
Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
_____	_____	_____	_____
Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
_____	_____	_____	_____

(conti.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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 DEPARTMENT OF STATE  
 TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

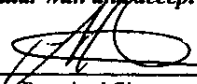
Name: Adriana Casado  
 Address: 10700 NW 66th St, #110  
Miami, FL 33178

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Carlos Casado  
 Address: 10700 NW 66th St, #110  
Miami, FL 33178

*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*

  
 Required Signature/Registered Agent

09/15/2014  
 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.*

  
 Required Signature/Incorporator

09/15/2014  
 Date