

P15000019470

(Requestor's Name)

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☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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CLERK OF STATE
TAMPA, FLORIDA

W115-7921

MD 3/2



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 3, 2015

CARLOS CASSINERA
5779 SW 53 TERR
MIAMI, FL 33155

SUBJECT: BECCAR INC
Ref. Number: W15000007921

We have received your document for BECCAR INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The print is not dark enough.

You must list at least one incorporator with a complete business street address.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the corrected original and one copy of 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.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 715A00002211

COVER LETTER

Re-submission

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

RECEIVED
15 FEB 27 AM 10:43
TALLAHASSEE, FL 32314

SUBJECT: Beccar 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

fee already submitted/cashed by
the department of State

FROM: Carlos Cassinera
Name (Printed or typed)

5779 SW 53 Terr.
Address

Miami, FL 33155
City, State & Zip

305 432 2482
Daytime Telephone number

carloscassinera@bellsouth.net
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: Beccar Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5779 SW 53 Terr.

Miami, FL 33155

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Financial Services & Life Insurance Sale

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carlos Cassinera, President Name and Title: _____

Address: 5779 SW 53 Terr. Address: _____
Miami, FL 33155 _____

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: _____

ARTICLE VI REGISTERED AGENT

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

Name: Carlos Cassinera

Address: 5779 SW 53 Terr.

Miami, FL 33155

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Carlos Cassinera

Address: 5779 SW 53 Terr.

Miami, FL 33155

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

2/23/15
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

2/23/15
Date

15 FEB 27 PM 2:04
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA