## P15000039159

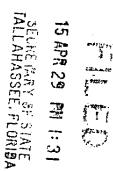
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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	
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## **COVER LETTER**

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

SUBJECT:	305 Inter	preters Inc TENAME-MUSTINGLI	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the arti	cles of incorporation and	i a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status
FROM:	Name	A LONSO	· · · · · · · · · · · · · · · · · · ·
	2841 A	JE 163 <sup>19</sup> 8	freet Apt. #709
	NORTH MIA	MI , BEACH, State & Zip	FL 33160
	(305) 336 Daytime Te maribelator E-mail address: (to be used	so @ bells	outh-net

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 The name of the c	NAME corporation shall be:	305	Interpret	ers	Inc	
article II 284/ N	PRINCIPAL OFFICE Principal street add			iling address	s, if different is:	
<u>NORTH</u>	MIAMI BEACH	, FL 3310	60	·		
ARTICLE III The purpose for y	<b>PURPOSE</b> which the corporation is org	vanized is:				
This Se	company is	going	to provide	. Int	erpretat	70n
					TALL A	7
ARTICLE IV The number of sha	SHARES ares of stock is: (O  INITIAL OFFICERS A  and Title: MARIBEL A	O /O  AND/OR DIREC	TORS RECTOR PRES	OENT	ASSEE, FLORIDA	9 17 1:32
Address	<del></del>	, , , , , , , , , , , , , , , , , , ,	<u> </u>			
Name and Address			Name and Title: Address:			
Name and	d Title:					

	and Title:	Name and Title
Addres	ss	Address:
RTICLE VI	REGISTERED AGENT	
ne <u>name and l</u> lame:	Florida street address (P.O. Box NOT acceptable MARIBEL ALONSO	) of the registered agent is:
ddress:	2841 NE 163rd Street Apt. # 709	— — — — — — — — — — — — — — — — — — —
duress.	NORTH MIAMI BEACH, FL 33160	LLAH
RTICLE VII	<u>INCORPORATOR</u>	PR 29 PR
ne <u>name and a</u>	address of the Incorporator is:	
Name:	MARIBEL ALONSO	
Address:	2841 NE 163rd Street Apt. # 709	
	NORTH MIAMI BEACH, FL 33160	<u> </u>
	EFFECTIVE DATE: f other than the date of filing:	(OPTIONAL)  not be more than five business days prior or 90 business
I an effective lys after the f lote: If the dat	filing.)	ble statutory filing requirements, this date will not be listed as
f an effective ays after the f ote: If the dat e document's aving been na	filing.)  te inserted in this block does not meet the applicate inserted in this block does not meet the applicate effective date on the Department of State's record	ble statutory filing requirements, this date will not be listed as is.  The sess for the above stated corporation at the place designated in
I an effective tys after the factor of the data decided document's aving been na	filing.)  te inserted in this block does not meet the applicate effective date on the Department of State's record amed as registered agent to accept service of procumed as	ble statutory filing requirements, this date will not be listed as is.  The sess for the above stated corporation at the place designated in
I an effective tys after the factor of the data decided document's aving been na	filing.)  te inserted in this block does not meet the applicate effective date on the Department of State's record amed as registered agent to accept service of procumed as	ble statutory filing requirements, this date will not be listed as is.  The east for the above stated corporation at the place designated in registered agent and agree to act in this capacity
f an effective ays after the force: If the date document's aving been not is certificate, it is certificate, it is this do	te inserted in this block does not meet the applicate effective date on the Department of State's record amed as registered agent to accept service of process am familiar with and accept the appointment as Required Signature/Registered Agent	ble statutory filing requirements, this date will not be listed as its.  Seess for the above stated corporation at the place designated in registered agent and agree to act in this capacity  04/27/2015  Date  The true. I am aware that the false information submitted in a
I an effective ays after the force: If the date document's awing been not is certificate, it is certificate, it is this document this do	te inserted in this block does not meet the applicate effective date on the Department of State's record amed as registered agent to accept service of process am familiar with and accept the appointment as Required Signature/Registered Agent accument and affirm that the facts stated herein a	ble statutory filing requirements, this date will not be listed as its.  Seess for the above stated corporation at the place designated in registered agent and agree to act in this capacity  04/27/2015  Date  The true. I am aware that the false information submitted in a

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 20, 2015

MARIBEL ALONSO 2841 NE 163 RD STREET APT #709 NORTH MIAMI BEACH, FL 33160

SUBJECT: 305 INTERPRETERS INC

Ref. Number: W15000027442

We have received your document for 305 INTERPRETERS INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

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.

Christine Haney Regulatory Specialist II New Filing Section

Letter Number: 415A00007845

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