

P22000031928

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

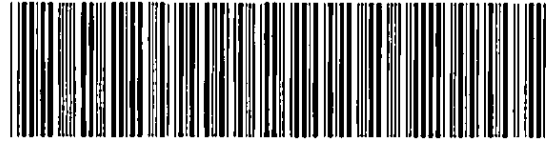
(Business Entity Name)

(Document Number)

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

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7D  
SECTION 607.01  
TALLAHASSEE, FL

2022 APR 28 AM 9:16

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SECTION 607.01  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

2022 APR 28 PM 4:07

RECEIVED

4/30/22



12905 SW 42 STREET Suite: 210  
 MIAMI, FL 33175  
 Phone: 305-444-4994  
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CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. F/EIRE Training Horse Corp  
 (CORPORATE NAME) (DOCUMENT #)

2. \_\_\_\_\_  
 (CORPORATE NAME) (DOCUMENT #)

3. \_\_\_\_\_  
 (CORPORATE NAME) (DOCUMENT #)

Walk-In     Pick up time: \_\_\_\_\_     Certified Copy     Certificate Of Status

New Filings	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Other:

Amendments	
<input type="checkbox"/>	Amendments
<input type="checkbox"/>	Resignation
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Other:

Other Filings	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Apostille:
<input type="checkbox"/>	Other:

Examiners Initials

**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: FLEIRE TRAINING HORSE CORP

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

6950 NW 77TH CT STE 310

\_\_\_\_\_

MIAMI, FL 33166

\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

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

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SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: RONEY CORDERO FLEIRE (P) Name and Title: \_\_\_\_\_

Address 6950 NW 77TH CT STE 310 Address: \_\_\_\_\_

MIAMI, FL 33166 \_\_\_\_\_

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:           RONEY CORDERO FLEIRE            
 Address:           6950 NW 77TH CT STE 310            
          MIAMI, FL 33166          

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 STATE ARCHIVES, FL  
 TALLAHASSEE, FL

**ARTICLE VII INCORPORATOR**

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

Name:           RONEY CORDERO FLEIRE            
 Address:           6950 NW 77TH CT STE 310            
          MIAMI, FL 33166          


**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

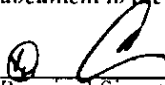
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**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*

 \_\_\_\_\_ Date \_\_\_\_\_  
 Required Signature/Registered Agent

*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.*

 \_\_\_\_\_ Date \_\_\_\_\_  
 Required Signature/Incorporator