

To:

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From: Yanet Avila

8/29/22, 12:30 PM

Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
AVILA 3 INC

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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: AVILA 3 INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

15614 SW 15 STPEMBROKE PINES, FL 33027**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: JUAN C. GONZALEZ (P)

Name and Title: _____

Address

15614 SW 15 ST

Address: _____

PEMBROKE PINES, FL 33027Name and Title: LUBY MERCEDES ROMERO GALDONA (VP) Name and Title: _____

Address

15614 SW 15 ST

Address: _____

PEMBROKE PINES, FL 33027

Name and Title: _____ Name and Title: _____

Address

Address: _____

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: JUAN C. GONZALEZAddress: 15614 SW 15 STPEMBROKE PINES, FL 33027**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: JUAN C. GONZALEZAddress: 15614 SW 15 STPEMBROKE PINES, FL 33027**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*/s/ Juan C. Gonzalez
Required Signature Registered Agent

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./s/ Juan C. Gonzalez
Required Signature Incorporator

Date _____

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