

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

P23000019238

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:
Division of Corporations
Fax Number : (850)617-6388

From:
Account Name : LAMADRID FINANCIAL SERVICES CORP
Account Number : 12020000059
Phone : (954)727-9771
Fax Number : (954)727-9773

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION BATTISTELLA INVESTMENTS CORP

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

Mar. 9. 2023 9:29AM

No. 0001 P. 1



March 8, 2023

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAMADRID FINANCIAL SERVICES CORP

SUBJECT: BATTISTELLA INVESTMENTS CORP
REF: W23000031808

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Pursuant to section 605.0207, F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on . Please amend your document accordingly.

Please return 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.

Genesis R Kersey
OPS Clerk

FAX Aud. #: H23000086819
Letter Number: 123A00005455

2023-03-08 10:00:00

COVER LETTER

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

SUBJECT: BATTISTELLA INVESTMENTS CORP
(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: CLAUDIA PIOVESAN
Name (Printed or typed)

1830 S OCEAN DR APT 2903
Address

HALLANDALE, FL 33009
City, State & Zip

786-710-0343
Daytime Telephone number

marnicmedicalresearch@gmail.com
E-mail address: (to be used for future annual report notification)

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

23 MAR - 9 11:53 AM

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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: BATTISTELLA INVESTMENTS CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address:
1830 S OCEAN DR APT 2903
HALLANDALE, FL 33009

Mailing address, if different: is:
SAME

ARTICLE III PURPOSE

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

ARTICLE IV SHARES

The number of shares of stock is: 1.000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CLAUDIA PIOVESAN - PRESIDENT

Name and Title: _____

Address: 1830 S OCEAN DR APT 2903

Address: _____

HALLANDALE, FL 33009

Name and Title: CATERINA PIOVESAN - VICEPRESIDENT

Name and Title: _____

Address: 1830 S OCEAN DR APT 2903

Address: _____

HALLANDALE, FL 33009

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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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: LAMADRID FINANCIAL SERVICES

Address: 10134 WEST FLAGLER ST

MIAMI, FL 33174

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CLAUDIA PIOVESAN

Address: 1830 S OCEAN DR APT 2903

HALLANDALE, FL 33009

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

 Required Signature/Registered Agent 3/5/23
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 3/5/23
Date

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