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# **COVER LETTER**

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

SUBJECT:	ALEJANDRO M.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the arti	cles 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
		ADDITIONAL CO	Status PPY REQUIRED
FROM:	ALEJANDRO N	M. TRUSTUO (Printed or typed)	<del></del>
		MBRA CIRCLE, S	vitE 424
	233 1101111	Address	<u> </u>
	CORAL GABLES	State & Zip	
	(305) 446-		
-	Daytime T	elephone number	
	atrujillo & V-C	lcpa.com	
	E-mail address: (to be used	a for future annual report r	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:

ALEJANDRO M. TRUJILLO, P. A.

# ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

255 ALHAMBRA CIRCLE, SVITE 424 CORAL GABLES, PL 33134

#### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

TRANSACTING ANY LAWFUL BUSINESS FOR WHICH COPPORATIONS MAY BE FORMED IN PLURIDA

#### ARTICLE IV SHARES

The number of shares of stock is: 100 Shares

# ARTICLE V <u>INITIAL OFFICERS AND/OR DIRECTORS</u>

List name(s), address(es) and specific title(s):

ALEJANDRO M. TRUSILLO, CPA 255 ALHAMBRA CIRCLE, SUITE 424 COKALGABLES, FL 33134

#### REGISTERED AGENT ARTICLE VI

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

ALEXANDRO M. TRUJILLO, CPA 255 ALHAMBRA CRCLE, SUITE 424 CORAL GABLES, FL 33134

# ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

ALETANDRO M. TRUJILLO, CPA 255 ALHAMBRA CIRCLE, SUITE 424 COKALGABLES, FC 33134

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 <