

P14000039/38

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

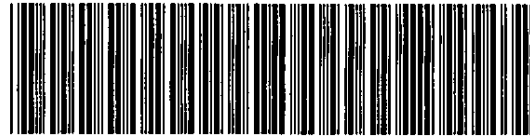
(Document Number)

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

Special Instructions to Filing Officer:

W14-25129

Office Use Only



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04/18/14--01023--023 \*\*70.00

2014 MAY -5 PM 3:46  
DIVISION OF SUPPORT  
INFORMATION

## COVER LETTER

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

SUBJECT: \_\_\_\_\_

Andros Sarduy P.A.

(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: \_\_\_\_\_

Andros Sarduy

Name (Printed or typed)

2401 S. Douglas Rd

Address

Miami, FL 33145

City, State & Zip

305 297-3557

Daytime Telephone number

ASarduy@fis.com

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 21, 2014

ANDROS SARDUY  
2401 S. DOUGLAS RD  
MIAMI, FL 33145

SUBJECT: ANDROS SARDUY P.A  
Ref. Number: W14000025129

We have received your document for ANDROS SARDUY P.A and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific business purpose of the professional association must be stated in the document.

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.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 914A00008473

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE I NAME**

The name of the corporation shall be:

Andros Sarduy P.A.

2014 MAY -5 PM 3:46

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

2401 S. Douglas rd

2401 S. Douglas rd

miami, FL

miami, FL

33145

33145

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To make a professional association. I am a real estate agent.

**ARTICLE IV SHARES**

The number of shares of stock is:

1

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

Name and Title:

Andros Sarduy

Name and Title:

Address

2401 S. Douglas rd

Address:

miami, FL

33145

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

(conti.)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Name and Title: \_\_\_\_\_ Name and \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Andros Sarduy  
Address: 2401 S. Douglas rd  
Miami, FL 33145

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Andros Sarduy  
Address: 2401 S. Douglas rd  
Miami, FL 33145

*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  
4/14/14  
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  
4/14/14  
Date