

7/25/22, 10:26 AM

Division of Corporations
Florida Department of State
Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION
ROLAND MARTINEZ, P.A.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

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:

Roland Martinez, P.A.

ARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is:

1102 Ponce de Leon Blvd.

Coral Gables, Florida 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For any and all legal purposes.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: Roland J. Martinez; Pres., VP,
Secretary, and Treasurer

Address

1102 Ponce de Leon Blvd.,

Coral Gables, Florida 33134

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

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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: Roland J. Martinez
Address: 1102 Ponce de Leon Blvd.,
Coral Gables, Florida 33134

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Roland J. Martinez
Address: 1102 Ponce de Leon Blvd.,
Coral Gables, Florida 33134


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

7/22/22
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

7/22/22
Date

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