

N23000015196

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

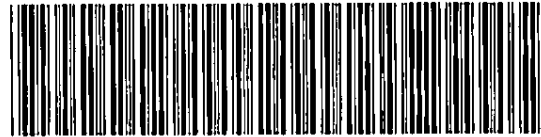
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2023

11:00

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-624

PLEASE USE FUNDS FROM THIS ACCOUNT: 120210000160: \$78.75

AUTHORIZATION SIGNATURE: _____

Miami Sunrise Research Corporation

BUSINESS

Document # _____

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___ Will wait

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___ Domestication

___ Other

X CORP

OTHER FILINGS

___ Annual Report

___ Fictitious Name

___ APOSTIL () _____

Country

AMMENDMENTS

___ Amendment

___ Resignation of R.A. Officer/Director

___ Change of Registered Agent

___ Dissolution/Withdrawal

___ Merger

___ Conversion

REGISTRATION/QUALIFICATIONS

___ Foreign filing

___ Limited Partnership

___ Reinstatement

___ Other

EXAMINER'S INITIALS: _____

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2330 CLARE DRIVE
TALLAHASSEE, FL 32309
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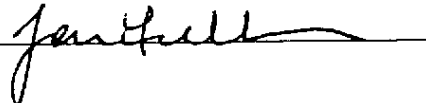
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EXAMINER'S INITIALS: _____

COVER LETTER

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

SUBJECT: Miami Sunrise Research Corporation

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: Jason Kung

Name (Printed or typed)

4 Centerpointe Drive Suite 310

Address

La Palma, CA 90623

City, State & Zip

714-252-5822

Daytime Telephone number

myaccountingteam@karladennis.com

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

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

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Miami Sunrise Research Corporation

ARTICLE II PRINCIPAL OFFICE

Principal street address:
50 W Mashta Dr, Key Biscayne, FL 33149

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

Organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of
distributions to organizations that qualify as exempt organizations described under Section 501(c)(3) of the Internal Revenue Code,
or corresponding section of any future federal tax code.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: As stated by the
bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gerardo Briones Baquedano, President

Name and Title: _____

Address 50 W Mashta Dr, Key Biscayne, FL 33149

Address: _____

Name and Title: Mariana Ancona, Vice President

Name and Title: _____

Address 50 W Mashta Dr, Key Biscayne, FL 33149

Address: _____

Name and Title: Gerardo Briones Hereford, Secretary

Name and Title: _____

Address 50 W Mashta Dr, Key Biscayne, FL 33149

Address: _____

2023

6:11:00

Name and Title: Gerardo Briones Baquedano, Treasurer Name and Title: _____

Address 50 W Mashta Dr, Key Biscayne, FL 33149 Address: _____

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: Gerardo Briones Baquedano

Address: 50 W Mashta Dr, Key Biscayne, FL 33149

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Jason Kung

Address: 4 Centerpointe Dr. #310

La Palma, CA 90623


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 of Registered Agent

12/19/2023

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.

12/19/2023

ARTICLE IX SUPPLEMENTAL PROVISIONS/INFORMATIONS

Upon the dissolution of the organization, its assets remaining after payment, or provision for payment, of all debts and liabilities of this organization shall be distributed to a nonprofit fund, foundation or organization which is organized and operated exclusively for charitable, religious, educational, and/or scientific purposes and which has established its tax-exempt status under Section 501(c)(3) of the Internal Revenue Code.