

N24000002237

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

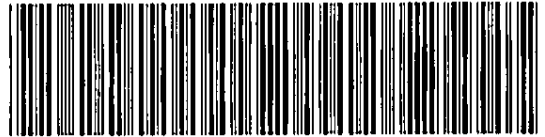
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



300422273863

FILED

2024 FEB 19 PM 12:37
SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED

2024 FEB 19 PM 1:53
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 02/19/2024 BY 60320

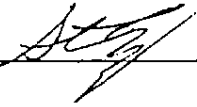
CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Miramar Panthers Corp

Please Debit FCA000000003 For: 78.75

Thank you Seth Neeley



- ☐ Art of Inc. File _____
- ☐ LTD Partnership File _____
- ☐ Foreign Corp. File _____
- ☐ L.C. File _____
- ☐ Fictitious Name File _____
- ☐ Trade/Service Mark _____
- ☐ Merger File _____
- ☐ Art. of Amend. File _____
- ☐ RA Resignation _____
- ☐ Dissolution / Withdrawal _____
- ☐ Annual Report / Reinstatement _____
- ☒ Cert. Copy _____
- ☐ Photo Copy _____
- ☐ Certificate of Good Standing _____
- ☐ Certificate of Status _____
- ☐ Certificate of Fictitious Name _____
- ☐ Corp Record Search _____
- ☐ Officer Search _____
- ☐ Fictitious Search _____
- ☐ Fictitious Owner Search _____
- ☐ Vehicle Search _____
- ☐ Driving Record _____
- ☐ UCC 1 or 3 File _____
- ☐ UCC 11 Search _____
- ☐ UCC 11 Retrieval _____
- ☐ Courier _____

2024 FEB 19 PM 12:17
STATE OF FLORIDA
TALLAHASSEE, FL

FILED

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

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

ARTICLE I NAME

The name of the corporation shall be: MIRAMAR PANTHERS CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address:
14359 MIRAMAR PARKWAY SUITE 290
MIRAMAR, FL 33027

Mailing address, if different is:

ARTICLE III PURPOSE

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

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: BY VOTE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>LUIS DELGADO - PD</u>	Name and Title:	_____
Address	<u>14359 Miramar Pkwy Ste 290</u>	Address:	_____
	<u>Miramar, FL 33027</u>		_____
Name and Title:	<u>Hector Abrahan Espina Gutierrez - SD</u>	Name and Title:	_____
Address	<u>5030 SW 126 Ave Apt 235</u>	Address:	_____
	<u>Miramar, FL 33027</u>		_____
Name and Title:	<u>Mark Vezina - VPD</u>	Name and Title:	_____
Address	<u>15853 East Wind Circle</u>	Address:	_____
	<u>Sunrise, FL 33326</u>		_____

SECRETARY OF STATE
TALLAHASSEE, FL

2024 FEB 19 PM 12:17

FILED

Name and Title: _____ Name and Title: _____

Address: _____ 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: Consulting Services of South Florida Inc

Address: 2121 Ponce de Leon Blvd., Ste. 1050

Coral Gables, FL 33134

ARTICLE VII INCORPORATOR

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

Name: Antonio Garcia

Address: 2121 Ponce de Leon Blvd., Ste. 1050

Coral Gables, FL 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 of Registered Agent

02-16-2024

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.

Required Signature of Incorporator

02-16-2024

Date

FILED
2024 FEB 19 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FL