Division of Corporations

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# Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : JIM SIERRA & ASSOCIATES

Account Number: 110677000356 Phone: (305)271-7310 Fax Number: (305)271-4422

# FLORIDA PROFIT CORPORATION OR P.A.

ROBERTO & NANCY, INC.

Certificate of Status	1
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SECRETARY OF STATE DIVISION OF CORPORATIONS

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# ARTICLES OF INCORPORATION

- OF -

# ROBERTO & NANCY, INC.

I UNDERSIGNED, hereby associate ourselves together for the purpose of becoming a corporation under the Laws of the State of Florida, by and under the provisions of the Statutes of the said State of Florida.

#### ARTICLE I

The name of this corporation shall be:

# ROBERTO & NANCY, INC.

# ARTICLE II

The corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

#### ARTICLE III

The maximum number of shares of capital stock that this corporation is authorized to have outstanding at any time is ONE HUNDRED (100) shares of common stock, having a par value of ONE (\$1,00) DOLLAR PER SHARE.

#### ARTICLE IV

The amount of capital with which this corporation will begin business shall be the sum of not less than ONE HUNDRED (\$100.00) DOLLARS.

Prepared by: JIM SIERRA & ASSOCIATES 5550 SW 81<sup>TH</sup> AVENUE MIAMI, FL 33165 TEL. (305) 271-7310 FAX. (305) 271-4422

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SECRETARY OF STATE DIVISION OF COMPORATIONS

## ARTICLE V

This corporation shall exist perpetually unless sooner dissolved according to law.

## ARTICLE VI

The initial street address of the principal office of the corporation shall be:

18672 93<sup>RD</sup> ROAD NORTH LOXAHATCHEE, FL 33470

## ARTICLE VII

The number of Directors of this corporation shall be at least one (1) and no more than five (5).

## ARTICLE VIII

The name and street address of the member of the first Board of Directors of this corporation are as follows:

ROBERTO GUZMAN President 18672 93<sup>rd</sup> Road North Loxahatchee, FL 33470

ROBIN ELIZABETH GUZMAN

V-President 18672 93<sup>rd</sup> Road North Loxahatchee, FL 33470

NANCY GUZMAN Treasurer 18672 93<sup>rd</sup> Road North Loxahatchee, FL 33470

LINDA ANN GUZMAN Secretary 18672 93<sup>rd</sup> Road North Loxabatchee, FL 33470

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# ARTICLE IX

The names and street addresses of the persons signing these Articles of Incorporation as subscriber is as follows:

ROBIN ELIZABETH GUZMAN 18672 93<sup>rd</sup> Road North Loxahatchee, FL 33470

# **ARTICLE X**

The corporate existence of this corporation shall begin on the date the Articles of Incorporation are filed of record.

IN WITNESS WHEREOF, the undersigned, ROBIN ELIZABETH GUZMAN being natural person(s), competent to contract, have here unto set-his/their hands and seal this, April 12, 2000.

ROBIN ELIZABETH GUZMAN

# STATE OF FLORIDA) S.S. COUNTY OF <u>DADE</u>)

BEFORE ME, the undersigned Notary Public of the State of Florida personally appeared ROBIN ELIZABETH GUZMAN, known and known to me, to be the person(s) described herein and who executed the foregoing Article of Incorporation, and he/she/they acknowledged before me that he/she/they executed the same freely and voluntarily for the purpose therein expressed.

WITNESS my hand and official seal this April 12, 2000

JIM SIERRA

My commission expires:



#### CERTIFICATE OF DESIGNATION

#### REGISTERED AGENT/REGISTERED OFFICE

IN COMPLIANCE WIT	H SECTION 607.325, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:
FIRST THAT: ROBE	RTO & NANCY, INC.
WITH ITS PLACE OF	BUSINESS AT: 18672 93 <sup>rd</sup> Road North Loxahatchee, FL 33470
HAS NAMED	LINDA ANN GUZMAN
	(Name of registered Agent)
LOCATED AT	18672 93rd Road North Loxahatchee, FL 33470
	(Street address and number of building - PO Box address ARE NOT acceptable)
CITY OF LOXAHAT	CHEE, STATE OF FLORIDA AS-ITS AGENT TO ACCEPT SERVICE OF PROCESS
WITHIN FLORIDA.	
	SIGNATURE (Corporate Officer) ROBIN E. GUZMAN
	TITLE V-PRESIDENT
	DATE April 12, 2000

I, HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATE CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE

(Registered Agent) LD

DATE April 12, 2000

Prepared by: JIM SIERRA & ASSOCIATES 5550 SW 87<sup>TH</sup> AVENUE MIAMI, FL 33165 TEL. (305) 271-7310 FAX. (305) 271-4422

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