

P00000108178

Requester's Name

CANIACHO AND ASSOCIATE (P.A.)
11025 NW. 43 LANE
Miami FL 33178

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #) 100003421561--5
-10/11/00--01036--001
*****75.00 *****70.00
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 NOV 17 PM 2:55

FILED

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

F. CHESSEY NOV 20 2000

W-24660

Examiner's Initials

CB 10-11

CR2E031(7/97)

Client notified of corrections
to article VII + VIII.



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

October 25, 2000

GABRIEL CAMACHO
11025 NW 43 LN
MIAMI, FL 33178

SUBJECT: CAMACHO AND ASSOCIATES P.A.
Ref. Number: W00000024660

We have received your document for CAMACHO AND ASSOCIATES 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):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

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

Please be specific about the purpose of your Professional Association (Medical Practice, Practice of Law etc.).

Please list complete addresses for article II, V, VI, & VII. You failed to list the city.

If this is not a Professional Association, please change the P.A. to Inc.

Please return the 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) 487-6919.

Beth Register
Corporate Specialist Supervisor

Letter Number: 200A00053733

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:

CAMACHO AND ASSOCIATE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Miami,
110 nw 43 lane, florida 33178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

professional services on designer, contructmon new furniture
and others.

ARTICLE IV SHARES

The number of shares of stock is:

500 cost initial are \$1.00 dolar.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Miami,
gabriel camacho 11025 nw lane, fl. 33178
lucila torres 11025 nw 43 lane, fl. 33178
claudia camacho 11025 nw 43 lane, fl. 33178
gabriel camacho Jr. 11025 nw 43 lane, fl. 33178

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

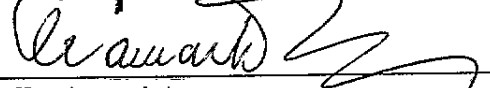
Gabriel Camacho 11025 nw 43, lane. fl. 33178
Miami

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Miami
gabriel camacho 11025 43~~rd~~ lane, fl. 33178
lucila torres 11025 43~~rd~~ lane, fl. 33178
claudia camacho 11025 nw 43 , lane. fl 33178
gabriel camacho jr 11025 nw 43 lane. fl. 33178

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 famillar with and accept the appointment as registered agent and agree to act in this capacity

X 

Signature/Registered Agent

Date

X 

Signature/Incorporator

Date

FILED
00 NOV 17 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA