

TRANSMITTAL LETTER

PD1000013128

FILED

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

01 FEB -5 PM 2:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT:

ANTONIO L. VARONA, <sup>Inc.</sup> PA.  
(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 of  
Status

ADDITIONAL COPY REQUIRED

FROM:

ANTONIO L. VARONA

Name (Printed or typed)

14387 SW 167 TERRACE

Address

MIAMI, FLORIDA 33177

City, State & Zip

305.969-2999 - no answer  
✓ recorder

Daytime Telephone number

200003563502--6

-01/22/01--01133--019

\*\*\*\*\*87.50 \*\*\*\*\*87.50

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

WOT-1740  
PM 1/23/01



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

January 23, 2001

ANTONIO L VARONA  
14387 SW 167 TERR  
MIAMI, FL 33177

SUBJECT: ANTONIO L. VARONA, P.A.  
Ref. Number: W01000001740

We have received your document for ANTONIO L. VARONA, P.A. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

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

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) 487-6915.

Pamela Hall  
Document Specialist

Letter Number: 101A00003739

14387 SW 167 Terrace  
Miami, Florida 33177

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**Antonio L. Varona**

January 30, 2001

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

Dear Sir or Madam:

I am returning to you a corrected articles of incorporation. I have chosen to incorporate as an "Incorporation" rather than as a "P.A.". I have sent you the new articles reflecting such changes. If you have any questions or concerns or need any type of clarification, please contact me at 305-969-2999.

Thank you very much for your time and consideration.

Sincerely,

  
Antonio L. Varona

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## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE I NAME

The name of the corporation shall be:

**Antonio L. Varona, Inc.**

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

14387 Southwest 167 Terrace  
Miami, Florida 33177

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any state, country, territory or nation.

### ARTICLE IV SHARES

The number of shares of stock is:

1000 shares of common stock

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Antonio L. Varona – President, Secretary and Director  
14387 Southwest 167 Terrace  
Miami, Florida 33177

ARTICLE VI REGISTERED AGENT

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

Antonio L. Varona  
14387 Southwest 167 Terrace  
Miami, Florida 33177

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

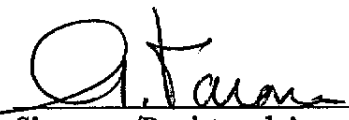
Antonio L. Varona  
14387 Southwest 167 Terrace  
Miami, Florida 33177

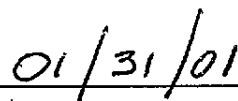
ARTICLE VIII TERM OF EXISTENCE

This corporation is to exist perpetually.

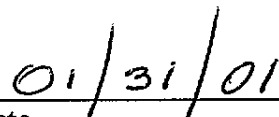
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*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date