

TRANSMITTAL LETTER  
Pg 18800083125

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

SUBJECT:

LOPEZ & TAFUR, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

800004549048-1  
-08/22/01--01068--004  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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:

ANA L. TAFUR

Name (Printed or typed)

10625 Hammocks <sup>Blvd</sup> suite 535

Address

Miami - florida 33196

City, State & Zip

305 - 388 - 0764

Daytime Telephone number

FILED  
01 AUG 22 PM 2:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

8-22-01  
10-22-01  
WPC

# 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:

LOPEZ & TAFUR, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

10625 Hammocks Blvd, Suite 535 Miami, Florida 33196

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

this corporation is organized for the purpose of transacting any and all lawful business.

## ARTICLE IV SHARES

The number of shares of stock is:

100 shares of common stock of a par value of \$ 1.00 per share.

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ANA L. TAFUR 10625 Hammocks Blvd, suite 535, Miami - florida 33196

Julian Lopez 10625 Hammocks Blvd, suite 535 - Miami - florida 33196

## ARTICLE VI REGISTERED AGENT

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

ANA L. TAFUR 10625 Hammocks Blvd, suite 535  
Miami, Florida 33196

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Julian Lopez 10625 Hammocks Blvd, suite 535  
Miami, Florida 33196

\*\*\*\*\*  
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

8-20-01

Signature/Incorporator

Date

8-20-01