

PO3000097355

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

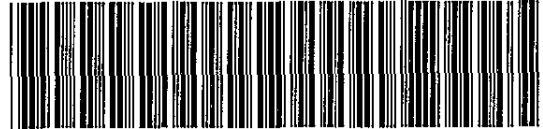
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/05/03--01053--005 **551.25

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2003 SEP -5 PM 1:52
CLERK OF STATE
TALLAHASSEE FLORIDA

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03 SEP -5 AM 10:29
CLERK OF STATE
TALLAHASSEE FLORIDA

9/5/03

EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101

Address

CORAL GABLES, FL 33134 (305) 444-4994

City/State/Zip

Phone #

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

OFFICE USE ONLY

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

1. COLLADO AND PARTNERS, INC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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

NEW FILINGS
<input checked="" type="checkbox"/> Profit
<input type="checkbox"/> NonProfit
<input type="checkbox"/> Limited Liability
<input type="checkbox"/> Domestication
<input type="checkbox"/> Other

AMENDMENTS
<input type="checkbox"/> Amendment
<input type="checkbox"/> Resignation of R.A., Officer/ Director
<input type="checkbox"/> Change of Registered Agent
<input type="checkbox"/> Dissolution/Withdrawal
<input type="checkbox"/> Merger

OTHER FILINGS
<input type="checkbox"/> Annual Report
<input type="checkbox"/> Fictitious Name
<input type="checkbox"/> Name Reservation

REGISTRATION/ QUALIFICATION
<input type="checkbox"/> Foreign
<input type="checkbox"/> Limited Partnership
<input type="checkbox"/> Reinstatement
<input type="checkbox"/> Trademark
<input type="checkbox"/> Other

Examiner's Initials

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:

COLLADO AND PARTNERS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

269 GIRALDA AVE. #101-A
CORAL GABLES, 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DOING BUSINESS IN FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

300

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s), address(es) and title(s):

RAMON COLLADO, PRESIDENT/TREASURER/SEC.
269 GIRALDA AVE. CORAL GABLES, FL. 33134 (SUITE 101A)

ARTICLE VI REGISTERED AGENT

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

RAMON COLLADO
269 GIRALDA AVE. CORAL GABLES, FL. 33134 (SUITE 101A)

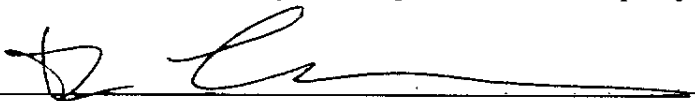
ARTICLE VII INCORPORATOR

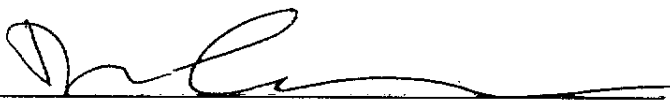
The name and address of the Incorporator is:

RAMON COLLADO
269 GIRALDA AVE. CORAL GABLES, FL. 33134 (SUITE 101A)

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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

x  8/31/03
Signature/Registered Agent Date

x  8/31/03
Signature/Incorporator Date

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TALLAHASSEE FLORIDA