

P03000105535

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

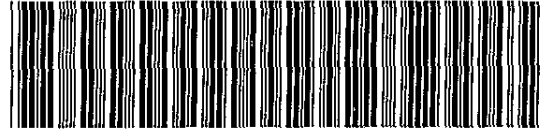
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03 SEP 22 PM 2:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09/25

## TRANSMITTAL LETTER

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

**SUBJECT:** DE CARDENAS & ASSOCIATES, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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:** ANNELI DE CARDENAS

Name (Printed or typed)

6990 SW 28 Street

Address

MIRAMAR, FLORIDA 33023

City, State & Zip

954-921-5500 EXT. 135

Daytime Telephone number

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

## 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:

DE CARDENAS & ASSOCIATES, INC.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

6990 SW 28 Street  
Miramar, Florida 33023

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Service Provider

### **ARTICLE IV SHARES**

The number of shares of stock is:

1000

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Anneli De Cardenas - President / Director  
Julio B. De Cardenas - Vice-President / Treasurer

### **ARTICLE VI REGISTERED AGENT**

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

Anneli De Cardenas  
6990 SW 28th Street  
Miramar, FL 33023

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Anneli De Cardenas  
6990 SW 28th Street  
Miramar, Florida 33023

\*\*\*\*\*  
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

9-18-03

\_\_\_\_\_  
Date

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

9-18-03

\_\_\_\_\_  
Date