

PO4000014341

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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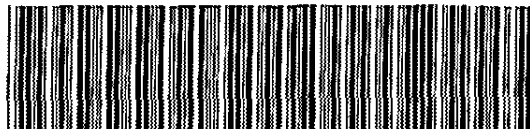
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JAN 14 PM 2:28

TS 23/04

TRANSMITTAL LETTER

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

SUBJECT: Espinosa Gallardo & 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: Victor Manuel ESpinosa Gallardo

Name (Printed or typed)

2950 NE 190th Street # 116

Address

Aventura, FL 33180

City, State & Zip

(305) 804-5216

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)

ARTICLE I NAME

The name of the corporation shall be:

Espinosa Gallardo & Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2950 NE 190th Street # 116
Aventura, FL 33180

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Accounting Services

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):

Victor Manuel Espinosa Gallardo
2950 NE 190th Street # 116
Aventura, FL 33180
President

ARTICLE VI REGISTERED AGENT

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

Victor Manuel Espinosa Gallardo
2950 NE 190th Street # 116
Aventura, FL 33180
President

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Victor Manuel Espinosa Gallardo
2950 NE 190th Street # 116
Aventura, FL 33180
President

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

Signature/Incorporator

01/09/04

Date

01/09/04

Date

FILED
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DIVISION OF CORPORATIONS
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