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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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DEPT. OF STATE  
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TALLAHASSEE, FLORIDA

*[Handwritten signature]*  
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# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Humberto Carbia, PA

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

☒ Art of Inc. File

☐ LTD Partnership File

☐ Foreign Corp. File

☐ L.C. File

☐ Fictitious Name File

☐ Trade/Service Mark

☐ Merger File

☐ Art. of Amend. File

☐ RA Resignation

☐ Dissolution / Withdrawal

☐ Annual Report / Reinstatement

☐ Cert. Copy

☒ Photo Copy

☐ Certificate of Good Standing

☐ Certificate of Status

☐ Certificate of Fictitious Name

☐ Corp Record Search

☐ Officer Search

☐ Fictitious Search

☐ Fictitious Owner Search

☐ Vehicle Search

☐ Driving Record

☐ UCC 1 or 3 File

☐ UCC 11 Search

☐ UCC 11 Retrieval

☐ Courier

# 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: Humberto Carbia, PA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 4035 Banyan Trails Drive  
Coconut Creek FL 33073

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Realstate Broker

## ARTICLE IV SHARES

The number of shares of stock is: Five Hundred Shares at One Dollar Par Value

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s): Humberto Carbia  
4035 Banyan Trails Drive  
Coconut Creek FL 33073

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is: Humberto Carbia  
4035 Banyan Trails Drive  
Coconut Creek FL 33073

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Humberto Carbia  
4035 Banyan Trails Drive  
Coconut Creek FL 33073

\*\*\*\*\*  
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

Date

Date

2004 FEB 12 P 9  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA 33073

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