# P04000053733

(Requestor's Name) (Address) (Address)
(Address)
(Address)
(ACCIRSS)
(1001000)
(City/State/Zip/Phone #)
🔀 PICK-UP 🔲 WAIT 🗌 MAIL
5.0
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Centried Copies Centricates of Status V <
Special Instructions to Filing Officer:
Call when Ready
]

3

**.** .

Office Use Only



03/30/04 -01004--025 \*\*87.50

js



CIL HAR 29 PH 5: 49 SECILE TAIL OF STATE FALLAHASSEE, FLORID

### TRANSMITTAL LETTER

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

# SUBJECT: \_\_\_\_\_ CONEXIÓN LOTINO OF NORTH FLORICIO, INC.

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

STO.00 Filing Fee \$78.75
Filing Fee
& Certificate of Status

\$78.75
 Filing Fee
 Certified Copy
 Certified Copy
 Certificate of Status
 ADDITIONAL COPY REQUIRED



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:

## CONEXIÓN LATINA, OF NORTH Floreida, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

P.O. BOX 21025 Tallahossee, FL 32310

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TRANSlatting Services

### ARTICLE IV SHARES

The number of shares of stock is: \_\_\_\_\_

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):

Janette FERNANDEZ, Pecsident

# ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: JANCHE FERNANCHZ JANCHE FERNANCHZ 1897 ChiNA DEINE TAILONAESEC, FE 32303 TAILONAESEC, FE 32303 ARTICLE VII INCORPORATOR INCORPORATOR The name and address of the Incorporator is: INCHE FERNANCHZ HAMING DEINE P.O. BOX 210255 TAILONAESEC, FE 32303 TAILONAESEC, FE 32310 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 MMILLA MMAN 2-29-4

mature/Incorporator

3-29-4

3-29-4

ណី