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TRANSMITTAL LETTER

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

SUBJECT: ____ JENNIFER R ESTRUMSA P.A.

\$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 CO	or i respectation]
	REDNADD VADET D	л		
FROM:		c (Printed or typed)		
FROM:	Name 20170 PINES BLVI	c (Printed or typed)		

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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)

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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ARTICLE I

The name of the corporation shall be:

JENNIFER R ESTRUMSA P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1300 WASHINGTON AVENUE - #645 MIAMI BEACH. FL 33119

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ATTORNEY

ARTICLE IV SHARES

The number of shares of stock is: 250 SHARES @\$1.00 PAR VALUE

INITIAL OFFICERS AND/OR DIRECTORS

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

PRESIDENT

JENNIFER R ESTRUMSA 716 MICHIGAN AVENUE #504 MIAMI BEACH, FL 33139

REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

JENNIFER R ESTRUMSA 1300 WASHINGTON AVENUE #645 MIAMI BEACH, FL 33119

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

BERNARD KOPET P.A. 20170 PINES BLVD. - SUITE #302 33029 PEMBROKE PINES, FL

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

gnature/Registered Agent

Signature/Incorporator