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OFFICE USE ONLY(DOCUMENT #)			
LAZARUS CORPORATE FILING	SERVICE		
3320 S.W. 87 AVENUE			
MIAMI, FLORIDA (305)552-5973			
	OFFICE USE ONLY		
	OFFICE OSL ONE		
CORPORATION NAME(S) & DOC	UMENT NUMBER(S) (if known):		
1. ALLISON ORT	iz P.A.		
(Corporation Name)	(Document #)		
2. (Corporation Name)	(Document #)		
3	·		
(Corporation Name)	(Document #)		
4. (Corporation Name)	(Document #)		
Walk in Pick up time	Certified Copy.		
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NEW FILINGS	AMENDMENTS		
Profit	Amendment		
NonProfit	Resignation of R.A., Officer/Director		
. Limited Liability	Change of Registered Agent		
Domestication	Dissolution/Withdrawal		
Other	Merger		
OTHER FILNGS	REGISTRATION/ QUALIFICATION		
Annual Report	Foreign		
Fictitious Name	Limited Partnership		
Name Reservation	Reinstatement		
	Trademark		
	Other Examiner's Initials		
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ARTICLES OF INCORPORATION OF

The undersigned incorporator(s), for the purpose of forming a Professional Service Corporation under Chapter 621 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation

ARTICLE I NAME

The name of the corporation shall be:

Allison Optiz P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

P.O. Box 451722 Miami, FL 33245

ARTICLE III PURPOSE

The purpose of this corporation shall be:

Real Estate

ARTICLE IV CAPITAL STOCK

The number of shares of stock that this corporation is authorize to have outstanding is:

100

ARTICLE V INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Allison Optiz 2200 S.W. 4ª Avence miani, fc 33129

ARTICLE VI BOARD OF DIRECTOR(S)

The name and address of the initial board of director(s) shall be:

Allison Catiz 2200: S.W. 4 Ave miami, fc, 33129

ARTICLE VII OFFICER(S)

The name, title and address of the officer(s) of this corporation shall be:

Allison Ortiz (P) 2200 s.w. 4 Avenue miami, fl 33129

ARTICLE VIII INCORPORATOR(S)

The name and address of the incoporator(s) to these Articles of Incorporation shall be:

Allison Ortiz 2200 S.W. 4 Avenue miami, FL 33129

The undersigned has (have) executed these Articles of Incorporation this 28 day of 2005.

Incorporator Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

Allison Ortiz P.A.		
(must include suffix)		
The name and address of the registered agent and office is:		
Allies Otiz	05 JAN 3	
(P.O. Box or Mail Drop Box NOT Acceptable)		
Micmi, FC 33125 (City/State/Zip)	42	

Ilaving been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I Hereby accept the appointed as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature of Registered Agent

The name of the corporation is:

1 28 05 Date