

P05000127801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000058518370

08/17/05--01099--018 **81.50

FILED
05 SEP 16 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓

9/11/05 BWC

6005-39002

TRANSMITTAL LETTER

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

SUBJECT: F.I.P. 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: ARMINDA RIVERO
Name (Printed or typed)

5700 S.W. 58 CT.
Address

MIAMI FL 33143
City, State & Zip

305-491-6802
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 17, 2005

ARMINDA RIVERO
5700 SW 58 CT.
MIAMI, FL 33143

SUBJECT: F.I.P., INC.
Ref. Number: W05000039002

We have received your document for F.I.P., INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6840.

Bruce W Kitchens
Document Specialist
New Filings Section

Letter Number: 905A00052524

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: **FAMILY INVESTMENT PROPERTIES, INC.**

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: **5700 SW. 58 CT.
MIAMI FL 33143**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

**ARMINDA RIVERO
HUMBERTO RIVERO**

ARTICLE VI REGISTERED AGENT

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

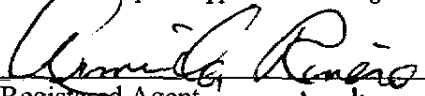
**ARMINDA RIVERO
5700 S.W. 58 CT.
MIAMI FL 33143**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**HUMBERTO RIVERO
5700 S.W. 58 CT.
MIAMI FL 33143**

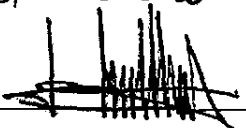
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

8/13/05

Date



Signature/Incorporator

8/13/05

Date

FILED
05 SEP 16 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA