

PO 0000065243

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

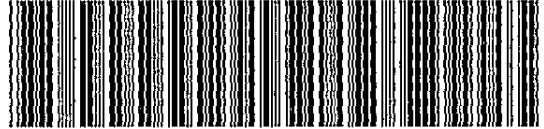
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2006 MAY -9 A 9:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

98-01-5

## TRANSMITTAL LETTER

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

**SUBJECT: Isaura E. Curiel, P.A.**

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(Proposed corporate name - must include suffix)

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

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee &  
Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

**FROM: Isaura E. Curiel**  
  
20505 E. Country Club Drive - #2133  
  
Aventura, FL 33180  
  
786-554-5128

**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:

Isaura E Curiel, P.A.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

20505 E. Country Club Drive - #2133  
Aventura, Florida 33180

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Selling Real Estate

### ARTICLE IV SHARES

The number of share of stock is:

500

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Isaura E Curiel, president  
Jeffrey Sloan, vice president  
20505 E. Country Club Drive - #2133  
Aventura, FL 33180

### ARTICLE VI REGISTERED AGENT

The names(s) and address(es):

Isaura E Curiel  
20505 E. Country Club Drive - #2133  
Aventura, FL 33180

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Isuara E Curiel  
20505 E. Country Club Drive - #2133  
Aventura, FL 33180

.....  
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

Date

Signature/Incorporator

Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA