

P06000071076

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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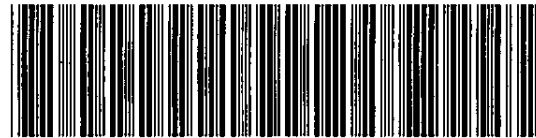
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2006 MAY 19 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

18th MAY 23 2006

COVER LETTER

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

SUBJECT: Clara Martinez, 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
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 COPY REQUIRED

FROM: Clara Martinez, Inc.

Name (Printed or typed)

8900 S.W. Coral Way, Suite 208

Address

Miami, Florida 33165

City, State & Zip

305 807-3057

Daytime Telephone number

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:

Clara Martinez, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8900 S.W. Coral Way, Suite 208
Miami, Florida 33165

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Services

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):

Clara Martinez, President
Camilo A. Ronderos, Vice President

ARTICLE VI REGISTERED AGENT

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

Rosa T. Romero, Esquire
19 West Flagler Street, Suite 507
Miami, Florida 33130

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Clara Martinez
4760 S.W. 6th Street
Miami, Florida 33134

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

Signature/Incorporator

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05/16/06

Date

05/16/06

Date