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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7/7/06

COVER LETTER

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

SUBJECT: LAW OFFICES OF ARNOLD TREVILLA, P.A.
(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: ARNALDO TREVILLA,
Name (Printed or typed)

3008 SW 139 AVE
Address

MIRAMAR FL 33027
City, State & Zip

305-500-9232
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:

LAW OFFICE OF ARNOLD TREVILLA, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

8180 NW 36 STREET SUITE 200 DORAL FL 33166

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

LAW OFFICE

ARTICLE IV SHARES

The number of shares of stock is:

2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARNOLD TREVILLA - PRESIDENT

ARTICLE VI REGISTERED AGENT

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

ARNOLD TREVILLA, 8180 NW 36 STREET SUITE 200 DORAL FL 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LAW OFFICE OF ARNOLD TREVILLA

8180 NW 36 STREET SUITE # 200

DORAL FL 33166

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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06 JUL -5 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6/27/06
Date

6/25/06
Date