

P06000/13443

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

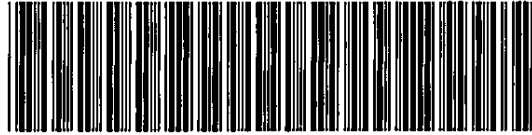
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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900078865019

08/21/06--01029--023 **78.75

FILED
06 AUG 30 PM 2:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRP
8/31

106-36901

COVER LETTER

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

SUBJECT: Miami Swim School, 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: Jeanette Escudero
Name (Printed or typed)

~~13203280040000~~ 8810 SW 36 ST
Address

Miami, FL 33165
City, State & Zip

305 804 7690
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 21, 2006

JEANETTE ESCUDERO
8810 SW 36 ST
MIAMI, FL 33165

SUBJECT: MIAMI SWIM SCHOOL, INC.
Ref. Number: W06000036901

We have received your document for MIAMI SWIM SCHOOL, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6879.

Ruby Dunlap
Regulatory Specialist
New Filing Section

Letter Number: 906A00051419

RECEIVED
06 AUG 30 AM 11:54
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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:

Miami Swim School, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9360 SW 20 St
miami, FL 33165

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any and all lawful activities
or business permitted.

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):

Armando Cepero^{JR.}, Pres./Director
9360 SW 20 ST
miami, FL 33165

ARTICLE VI REGISTERED AGENT

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

Armando Cepero^{JR.}
9360 SW 20 ST
miami, FL 33165

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jeanette Escudero
~~131722 0800368 ST~~ 8810 SW 36 ST
miami, FL 33165

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

Date

Date

FILED
06 AUG 30 PM 2:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA