

POL0000150001

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

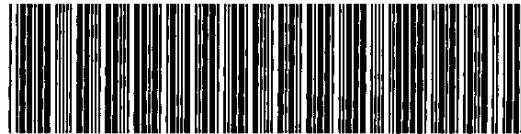
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/04/06--01058--006 **78.75

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06 DEC -4 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/5/06

COVER LETTER

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

FILED
06 DEC -4 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Willian Espinosa, 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: Willian Espinosa, P.A.

Name (Printed or typed)

20872 SW 90 Place

Address

Miami, Florida 33189

City, State & Zip

786 376 1090

Daytime Telephone number

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:

William Espinosa, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

20872 SW 90 Place
Miami, Florida 33189

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide Real Estate and Mortgage 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):

William Espinosa
20872 SW 90 Place
Miami, Florida 33189

ARTICLE VI REGISTERED AGENT

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

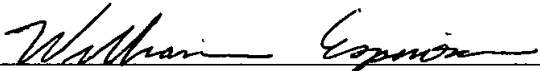
William Espinosa
20872 SW 90 Place
Miami, Florida 33189

ARTICLE VII INCORPORATOR

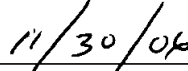
The name and address of the Incorporator is:

William Espinosa
20872 SW 90 Place
Miami, FI 33189

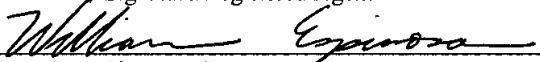
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



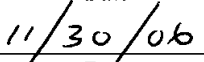
Signature/Registered Agent



Date



Signature/Incorporator



Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA