POUDO 153180

-		
(Re	questor's Name)	
(Address)		
(Ad	dress)	
(Cil	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificate	s of Status
Special Instructions to Filing Officer:		
	 	

Office Use Only



100082200211

12/12/06--01026--003 **87.50



Pa

COVER LETTER

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

SUBJECT: Aida M. Landa, 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 \$78.75 \$78.75 **▼** \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Aida M. Landa Name (Printed or typed) 1257 SW 15 Street #102 Address Miami, Florida 33145 City, State & Zip 786-385-0170 Daytime Telephone number

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

ARTICLES OF INCORPORATION

In sompliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Aida M. Landa, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1257 SW 15 Street #102 Miami, Florida 33145

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To open and operate a law office, to practice law, to purchase or otherwise acquire, lease or rent the necessaey real estate, equipment and fixtures to operate such facilities. To engage in any such activities customary to the practice of law and legal related services.

ARTICLE IV SHARES

The number of shares of stock is:

100 shares of common stock

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Aida M. Landa 1257 SW 15 Street #102 Miami FL 33145

ARTICLE VI REGISTERED AGENT

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

Aida M. Landa 1257 SW 15 Street #102 Miami FL 33145

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Aida M. Landa 1257 SW 15 Street #102 Miami FL 33145

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