

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)205-0381

From:

Account Name : XIOMARA LEE, P.A.

Account Number: 120040000008

: {305}262-2323

Phone Fax Number

: (305) 262-2324

FLORIDA PROFIT/NON PROFIT CORPORATION

CARLOS VELASQUEZ P.A.

Certificate of Status	1
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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: CARLOS VELASQUEZ P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 7645 WEST 24 AVE STE 100 HIALEAH, FL 33016

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
REAL ESTATE 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): CARLOS VELASQUEZ (PRESIDENT-DIRECTOR) 7545 WEST 24 AVE STE 100 HIALEAH, FL 33016

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

CARLOS VELASQUEZ 7545 WEST 24 AVE STE 100 HIALEAH, FL 33016

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

CARLOS VELASQUEZ 7545 WEST 24 AVE STE 100 HIALEAH, FL 33016

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

| 12-18-06 |
| Signature/Registered Agent | Date |
| Signature/Incorporator | Date |
| Date |

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ALLANAS CENTRAL STATES