

P07000031364

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

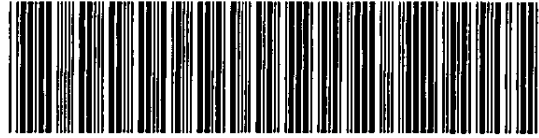
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/09/07--01007--003 **78.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: DESIGNS OF SOUTH FLORIDA, CORP
(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: PEDRO E ARMAIGNAC
Name (Printed or typed)

18100 N BAY RD SUITE 602
Address

SUNNY ISLES, FL 33160
City, State & Zip

(305) 965-6022
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:

DESIGNS OF SOUTH FLORIDA, CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

18100 N BAY RD SUITE 602
SUNNY ISLES, FL 33160

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TRANSACT ANY AND ALL LAWFUL BUSINESS.
SAID CORPORATION SHALL FURTHER HAVE POWERS:
TO HAVE PERPETUAL SUCCESSION BY ITS CORPORATE.

ARTICLE IV SHARES

The number of shares of stock is:

50 SHARES AT \$ 10.00 PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PEDRO E ARMAIGNAC,
18100 N Bay rd SUITE 602 Sunny Isles, FI 33160
PRESIDENT AND SECRETARY

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

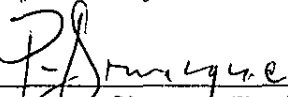
PEDRO E ARMAIGNAC
18100 N BAY RD SUITE 602
SUNNY ISLES, FL 33160

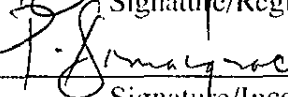
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PEDRO E ARMAIGNAC
18100 N BAY RD SUITE 602
SUNNY ISLES, FL 33160

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

3/5/07

Date
3/5/07

Date