

PO7000093298

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

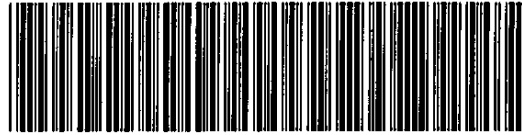
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/20/07--01020--014 **78.75

FILED
07 AUG 20 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Wanda Idelisses Hugo 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: Wanda Idelisses Hugo
Name (Printed or typed)

17041 NW 85 Ct
Address

Milner FL 33015
City, State & Zip

305-345-1167
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:

Wanda Idelisses Lugo P. A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

17041 NW 85 Ct miami Fl 33015

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate

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):

Wanda Idelisses Lugo
17041 NW 85 Ct
miami Fl 33015

ARTICLE VI REGISTERED AGENT

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

Wanda Idelisses Lugo
17041 NW 85 Ct
miami Fl 33015

ARTICLE VII INCORPORATOR

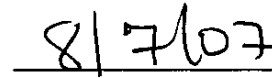
The name and address of the Incorporator is:

Wanda Idelisse Lugo
17041 NW 85 Ct
miami Fl 33015

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 Agent

Date

FILED
07 AUG 20 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA