

PO7000095287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

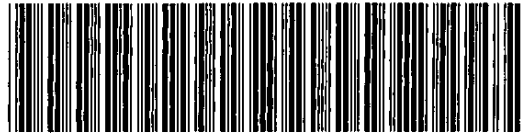
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 AUG 24 PM 4:01

8/24/07

COVER LETTER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 AUG 24 PM 4:01

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

SUBJECT: KRISTINA PARENT 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: KRISTINA PARENT

Name (Printed or typed)

1000 ISLAND BLVD. #707

Address

AVENTURA, FL 33160

City, State & Zip

(305) 467-1322

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)

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ARTICLE I NAME

The name of the corporation shall be:

KRISTINA PARENT P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1000 ISLAND BLVD #707
AVENTURA, FL 33160

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE SALES

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

KRISTINA PARENT
1000 ISLAND BLVD #707
AVENTURA, FL 33160
PRESIDENT

ARTICLE VI REGISTERED AGENT

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

KRISTINA PARENT
1000 ISLAND BLVD #707
AVENTURA, FL 33160

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KRISTINA PARENT
1000 ISLAND BLVD #707
AVENTURA, 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

KRISTINA PARENT

Signature/Incorporator

KRISTINA PARENT

Date

Date