

P08000009882

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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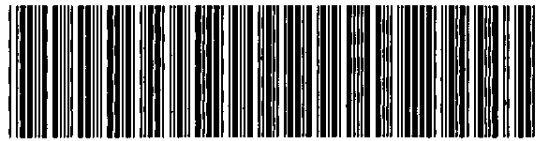
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/16/08--01012--014 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JAN 28 PM 4:23

W08000002845

Ep 1/28/08

COVER LETTER

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

SUBJECT: Walfreddy Gomez P.A.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Document Filing W08000002845

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Walfreddy Gomez
Name (Printed or typed)

770 Ponce de Leon Blvd PH
Address

Coral Gables, FL 33134
City, State & Zip

305 219-6775
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 17, 2008

WALFREDDY GOMEZ
770 PONCE DE LEON BLVD PH
CORAL GABLES, FL 33134

SUBJECT: GOMEZ & ASSOCIATES, P.A.
Ref. Number: W08000002845

We have received your document for GOMEZ & ASSOCIATES, P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The specific business purpose of the professional association must be stated in the document.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6062.

Eula Peterson
Regulatory Specialist II
New Filing Section

Letter Number: 208A00003761

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:

Walfreddy Gomez P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

770 Ponce de Leon Blvd PH
Coral Gables, FL 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real State business and Tax Preparation.

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Walfreddy Gomez
8930 SW 6 LN
Miami, FL 33174

President

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DIVISION OF CORPORATIONS
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ARTICLE VI REGISTERED AGENT

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

Walfreddy Gomez
8930 SW 6 LN
Miami, FL 33174

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Walfreddy Gomez
8930 SW 6 LN
Miami, FL 33174

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

01/23/08
Date

01/23/08
Date

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