

POS 000035294

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

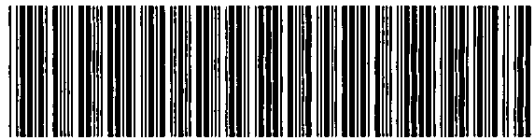
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 APR -7 PM 2:15

W08000015394

8/24/78

## COVER LETTER

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

**SUBJECT:** A. Salas & Associates, 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:** Allagracia Salas  
Name (Printed or typed)

4581 Weston Road #196  
Address

Weston, Florida 33331  
City, State & Zip

954-675-1707  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 25, 2008

ALTAGRACIA SALAS  
4581 WESTON ROAD #196  
WESTON, FL 33331

SUBJECT: A SALAS & ASSOCIATES, P.A.  
Ref. Number: W08000015394

We have received your document for A SALAS & ASSOCIATES, P.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Please sign your full name.

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: 408A00017709

## 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:

A. Salas & Associates, P.A.

### ARTICLE II PRINCIPAL OFFICE

The principle street address and mailing address, if different is:

4581 Weston Road #196  
Weston, Florida 33331

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Tax & Accounting Services

### 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):

President & Director  
Altagracia Salas - 4581 Weston Road # 196, Weston, Florida 33331

### ARTICLE VI REGISTERED AGENT

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

Altagracia Salas - 4581 Weston Road # 196, Weston, Florida 33331

### ARTICLE VII INCORPORATOR

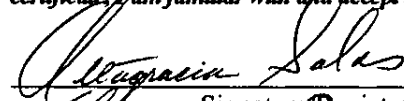
The name and address of the Incorporator is:

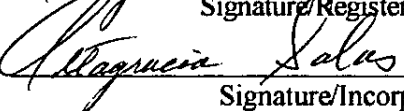
Altagracia Salas - 4581 Weston Road # 196, Weston, Florida 33331

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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

4-3-08  
Date

4-3-08  
Date