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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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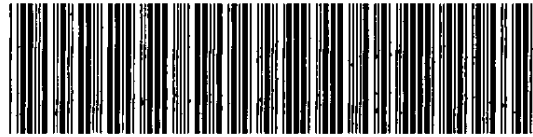
(Business Entity Name)

(Document Number)

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

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2008 JUN -9 PM 12:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C.S. 670

## COVER LETTER

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

**SUBJECT:** Fernando A. Simo, 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** FERNANDO SIMO

Name (Printed or typed)

815 LAKE EVALYN DRIVE

Address

CELEBRATION, FLORIDA 34747

City, State & Zip

407-361-8886

Daytime Telephone number

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

FILED

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

2008 JUN -9 PM 12: 39

**ARTICLE I NAME**

The name of the corporation shall be:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FERNANDO SIMO, P.A.

**ARTICLE II PRINCIPAL OFFICE**

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

815 LAKE EVALYN DRIVE  
CELEBRATION, FLORIDA 34747

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

PROVIDE BUSINESS BROKERAGE SERVICES

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

FERNANDO SIMO, PRESIDENT  
815 LAKE EVALYN DRIVE  
CELEBRATION, FLORIDA 34747

**ARTICLE VI REGISTERED AGENT**

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

FERNANDO SIMO  
815 LAKE EVALYN DRIVE  
CELEBRATION, FLORIDA 34747

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

FERNANDO SIMO  
815 LAKE EVALYN DRIVE  
CELEBRATION, FLORIDA 34747

\*\*\*\*\*

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

6/4/08  
\_\_\_\_\_  
Date

6/4/08  
\_\_\_\_\_  
Date