

PI/0000012360

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600192993736

02/03/11--01010--005 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 FEB -3 PM 2:22

APPROVED
AND
FILED

COVER LETTER

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

SUBJECT: Odisa Gonzalez, CPA, PA.

(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: Odisa Gonzalez

Name (Printed or typed)

2512 SW 83rd Ave.

Address

Miramar, FL 33025

City, State & Zip

305-332-7118

Daytime Telephone number

odiglez@gmail.com

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 14, 2011

ODISA GONZALEZ
2512 SW 83RD AVE
MIRAMAR, FL 33025

SUBJECT: ODISA GONZALEZ, CPA, PA
Ref. Number: W11000002758

We have received your document for ODISA GONZALEZ, CPA, PA, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees:	\$35.00
Registered Agent Designation	\$35.00
Certified Copy	\$8.75
Certificate of Status	\$8.75

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) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 911A00001360

ARTICLES OF INCORPORATION

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

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be:

Odisa Gonzalez, CPA, PA

11 FEB -3 PM 2:22

ARTICLE II PRINCIPAL OFFICE

Principal street address
2512 SW 83rd Ave
Miramar, FL 33025

Mailing address different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Accounting and Tax

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Odisa Gonzalez, President
Address: 2512 SW 83rd Ave.
Miramar, FL 33025

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Odisa Gonzalez
Address: 2512 SW 83rd Ave.
Miramar, FL 33025

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Odisa Gonzalez
Address: 2512 SW 83rd Ave.
Miramar, FL 33025

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

Odisa Gonzalez
Required Signature/Registered Agent

01-07-11
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Odisa Gonzalez
Required Signature/Incorporator

01-07-11
Date