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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 MAR 29 10:08 AM
J. G. HARRIS

COVER LETTER

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

SUBJECT: A.F.P. Incorporated

(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: Adriana Francisca Peralta

Name (Printed or typed)

12827 sw 29th st

Address

Miramar, Fl. 33027

City, State & Zip

954-557-1878

Daytime Telephone number

apera004@fiu.edu

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

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TALLAHASSEE, FLORIDA

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)

ARTICLE I NAME

A.F.P. Incorporation

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

12827 sw 29th st
Miramar FL 33027

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Independent contractor / L.P.N.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Adriana Peralta

Address: 12827 sw 29th st
Miramar FL 33027

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: Adriana Peralta

Address: 12827 sw 29th st
Miramar FL 33027

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Adriana Peralta

Address: 12827 sw 29th st
Miramar FL 33027

Having been named as registered agent to accept service of process for the above stated corporation and the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Adriana J. Peralta
Required Signature/Registered Agent

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.

Adriana J. Peralta
Required Signature/Incorporator

Date

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