

P12000067422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

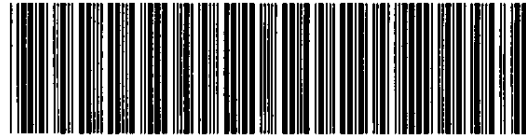
(Business Entity Name)

(Document Number)

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

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12 AUG -2 PM 1:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers AUG 03 2012

## COVER LETTER

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

SUBJECT: Ana M. Fuentes, 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: Ana M. Fuentes

Name (Printed or typed)

9161 NW 26th Place

Address

Sunrise, FL 33322-2828

City, State & Zip

(954)445-2576

Daytime Telephone number

realtoranafuentes@gmail.com

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** Ana M. Fuentes, P.A.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
9161 NW 26th Place  
Sunrise, FL 33322-2828

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To engage in the practice of licensed real estate sales and to exercise the powers now or hereafter granted to professional service corporations.

**ARTICLE IV SHARES**

The number of shares of stock is: maximum 500 at a par value of \$1.00 per share

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

Name and Title: Ana M. Fuentes, President  
Address: 9161 NW 26th Place  
Sunrise, FL 33322-2828

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:

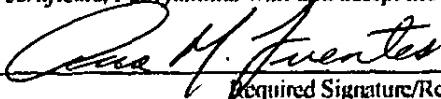
Name: Ana M. Fuentes  
Address: 9161 NW 26th Place  
Sunrise, FL 33322-2828

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: Ana M. Fuentes  
Address: 9161 NW 26th Place  
Sunrise, FL 33322-2828

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

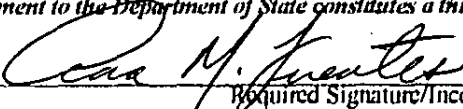


Required Signature/Registered Agent

07/10/2012

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.



Required Signature/Incorporator

07/10/2012

Date

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