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\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

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(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

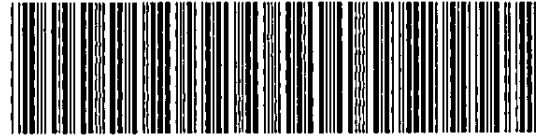
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 AUG 30 PM 12:39

Is 8/31/12

## COVER LETTER

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

SUBJECT: **FlorMiami, Inc.**

(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: **Michelle Velez**

Name (Printed or typed)

**1717 N Bayshore Drive, Unit 4251**

Address

**Miami, FL 33132**

City, State & Zip

**305-588-2966**

Daytime Telephone number

**mvelez0223@gmail.com**

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

**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

FlorMiami, Inc.

The name of the corporation shall be:

## ARTICLE II PRINCIPAL OFFICE

Principal street address

1717 N Bayshore Drive

Unit 4251

Miami, FL 33132

Mailing address, if different is:

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

All legal transactions.

## ARTICLE IV SHARES

The number of shares of stock is: 100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michelle Velez, President

Address: 1717 N Bayshore Drive

Unit 4251

Miami, FL 33132

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: Michelle Velez

Address: 1717 N Bayshore Drive, Unit 4251

Miami, FL 33132

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Michelle Velez

Address: 1717 N Bayshore Drive, Unit 4251

Miami, FL 33132

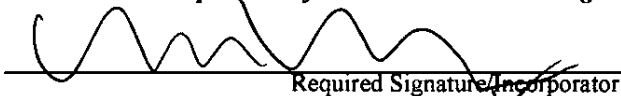
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 AUG 30 PM 12:39

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

08/28/12  
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

08/28/12  
Date