

P 120089100

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

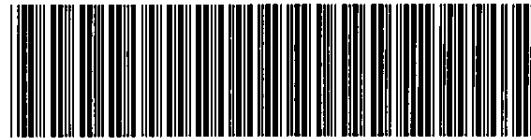
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/03/12--01012--009 **78.75

12 OCT 22 PM 1:45
SECRETARY OF STATE
DIVISION OF CORPORATIONS

12/23/12 11:12:58



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
12 OCT 22 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

October 4, 2012

CAROLINA SARMIENTO
186 SE 12 TERR, APT 1206
MIAMI, FL 33131

SUBJECT: CAROLINA SARMIENTO, P.A.
Ref. Number: W12000050980

We have received your document for CAROLINA SARMIENTO, P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific business purpose of the professional association must be stated in the document.

An effective date **may** be added to the Articles of Incorporation **if a 2013 date is needed**, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

Please return 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) 245-6052.

Pamela Smith
Regulatory Specialist II

Letter Number: 212A00024627

COVER LETTER

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

SUBJECT: CAROLINA SARMIENTO, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Carolina Sarmiento
Name (Printed or typed)

186 SE 12 Terrace, Apt 1206
Address

Miami FL, 33131
City, State & Zip

9547931924
Daytime Telephone number

carosarmiento2000@yahoo.com.ar
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

CAROLINA SARMIENTO, P.A.

The name of the corporation shall be:

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

12 OCT 22 PM 1:45

Mailing address, if different is:

ARTICLE II PRINCIPAL OFFICE

Principal street address

186 SE 12 Terrace, Apt 1206

Miami FL, 33131

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate

ARTICLE IV SHARES 100

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carolina Sarmiento - President

Address:

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: Carolina Sarmiento

Address: 186 SE 12 Terrace, Apt 1206
Miami FL, 33131

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Carolina Sarmiento

Address: 186 SE 12 Terrace, Apt 1206
Miami FL, 33131

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

Carolina Sarmiento
Required Signature/Registered Agent

09/23/12
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.

Carolina Sarmiento
Required Signature/Incorporator

09/23/12
Date