Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H12000293862 3)))



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Division of Corporations

Account Name

Fax Number : (850)617-6381

From:

: CORPDIRECT AGENTS, INC.

Account Number : 110450000714 : (850)222-1173

Fax Number (850)224-1640

**Bnter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:	 	 	 		

FLORIDA PROFIT/NON PROFIT CORPORATION MIAMI SUNRISE PROPERTIES CORP

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75



T. Burch DEC 1, 9 2012



December 17, 2012

FLORIDA DEPARTMENT OF STATE Division of Corporations

CORPDIRECT AGENTS, INC.

SUBJECT: MIAMI SUNRISE PROPERTIES CORP.

REF: W12000062186

ASE GIVE ORIGINAL SUBMISSION PATE AS FILE DATE

12/14

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

If you have any further questions concerning your document, please call (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section FAX Aud. #: H12000293862 Letter Number: 412A00029677

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			ORPORATION For Chapter 621, F.S. (Profit)			
ARTICLE I The name of the	corporation shall be: Miami	Sunrise	Properties Corp	•	•	
article II	PRINCIPAL OFFICE Principal street address 1904 NW 84 Avenue	•	Mailing address	Malling address, if differenting		
	Miami, FL 33128	 				
		<u> </u>		至市四	_	
ARTICLE III The purpose for	PURPOSE which the corporation is organized	ls: Invest a	and Manage Assets		ピニカコ	
	thares of stock is: 1,000			FOR THE STATE		
ARTICLE V	INITIAL OFFICERS AND A Title: Jose Afonso Assumption, Presiden	OR DIRECTO	RS			
Name and Address:	1904 NW 64 Avenue	N LIGHTON AND ADDRESS				
Adm cost	Miami, FL 33126	1	Auditoss.		, .	
					٠,	
		·			Ċ	
	Title:		Name and Title:			
Address:		 			٠.	
		-	-		٠.	
		}			٠.	
Name and	Title:		Name and Title:			
Address:		<u></u> .	Address:		;	
					٠.	
						
ARTICLE VI	REGISTERED AGENT	•		•		
The name and	Florida street address (P.O. Box N	(OT acceptable)	of the registered agent is:	•	٠.	
Name:	Blone Arechaga					
Address:	1904 NW 84 Avenue	<u> </u>	_		-	
	Mlami, FL 53126	- 				
ADMINE D	INCORPORATOR	ļ			:	
The name and	address of the Incorporator is:	į			:	
Name:	Itens Kobert	1				
Address:	393 S.E. 2nd Avenue	!		المرابع	2.	
	Miami, FL 33131	i			٠.	
Having been no this certificate,	omed as registered agent to accept I am familiar with and accept the a	zervice of proce appointment as i	egistered agent and agree to act in	n at the place designates in this capacity	: '	
	lan	will be		12/11/2017 -		
	Daniel Clark	Jackson Agreed		1-12100	٠,	
	Required Signature/Reg	hareted Victur		Lat		
I submit this di	ocument and affirm that the facts	stated herein a	re true. I am aware that the faise	information submitted in a		
document to the	e Department of State constitutes a	third degree fel	ony as provided for in £817.155, I	.s .		
	11/1.	1/2/		12/14/2012		
	Merelle			14191012		
	Required Signature/In	scorporator		\ nate	:	