P13000053826

(Re	questor's Name)			
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(Ad	dress)			
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(Cit	y/State/Zip/Phone	#)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nam	e)		
(50	Entry Name	- ,		
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
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Special Instructions to Filing Officer:				

Office Use Only



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06/07/13--01009--007 **78.75

13 JUN 20 PH 4: 36 SECRETARY OF STATE FALLAHASSEE, FLORING

W3-33612

(p.sl)

1. Burch JUN 1 9 2013

COVER LETTER

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

SUBJECT: MUJICA FAMILY DIVE, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: □ \$78.75 \$87.50 \$70.00 **\$78.75** Filing Fee Filing Fee Filing Fee, Filing Fee & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

	Name (Printed or typed)
6600 Sw 1	25th Avenue
	Address
Miami, Flo	orida 33183
· · · · · · · · · · · · · · · · · · ·	City, State & Zip
305.598.7	038
·	Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 10, 2013

MERCEDES H. MUJICA 6600 SW 125TH AVE MIAMI, FL 33183

SUBJECT: MUJICA FAMILY DIVE, INC.

Ref. Number: W13000033612



We have received your document for MUJICA FAMILY DIVE, INC. 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 document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the corrected original and one copy of 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.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 113A00014474

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

RTICLE II PR	INCIPAL OFFICE Principal <u>street</u> address	Mailing address, if different is:		
600 Sw 12	25th AVENUE			
ЛАМІ, FLC	ORIDA 33183			
	1-10-111-111-111-111-111-111-111-111-11			
RTICLE III PUF	the corporation is organized is: To pro	vied		
ne purpose for wnich Scuba diving le	essons and in the future to als	so inclued a	dive shop.	
	150-00-00-00-00-00-00-00-00-00-00-00-00-0			
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		,	SEC 13	
			20 ASSI	
RTICLE IV SH	ARES 100		₩	
he number of shares of	f stock is:		🚆 🚄 ယ	
			्रामा क	
	TIAL OFFICERS AND/OR DIRECTOR	<u>s</u>	∜.tn . φ	
RTICLE V INI	TIAL OFFICERS AND/OR DIRECTOR	_	Mercedes H. Mujica, Secretary	
RTICLE V INI Name and Titl		Name and Title	Mercedes H. Mujica, Secretary 6600 Sw 125th Avene	
RTICLE V INI	<i>TIAL OFFICERS AND/OR DIRECTOR</i> c: Jose L. Mujica, President	_	;	
RTICLE V INI Name and Titl	TIAL OFFICERS AND/OR DIRECTOR e: Jose L. Mujica, President 6600 Sw 125th Avenue	Name and Title	6600 Sw 125th Avene	
RTICLE V INI Name and Titl Address	TIAL OFFICERS AND/OR DIRECTOR Solve L. Mujica, President 6600 Sw 125th Avenue Miami, Florida 33183	Name and Title Address:	6600 Sw 125th Avene Miami, Florida 33183	
Name and Title Address Name and Title	TIAL OFFICERS AND/OR DIRECTOR Jose L. Mujica, President 6600 Sw 125th Avenue Miami, Florida 33183 Jose A. Mujica, Executive Director	Name and Title Address: Name and Title	6600 Sw 125th Avene Miami, Florida 33183 Angelica M. Mujica, Vice President	
RTICLE V INI Name and Titl Address	TIAL OFFICERS AND/OR DIRECTOR Jose L. Mujica, President 6600 Sw 125th Avenue Miami, Florida 33183 Jose A. Mujica, Executive Director 6600 Sw 125th Avenue	Name and Title Address:	6600 Sw 125th Avene Miami, Florida 33183 Angelica M. Mujica, Vice President 6600 Sw 125th Avenue	
Name and Title Address Name and Title	TIAL OFFICERS AND/OR DIRECTOR Jose L. Mujica, President 6600 Sw 125th Avenue Miami, Florida 33183 Jose A. Mujica, Executive Director	Name and Title Address: Name and Title	6600 Sw 125th Avene Miami, Florida 33183 Angelica M. Mujica, Vice President	
Name and Title Address Name and Title	TIAL OFFICERS AND/OR DIRECTOR Jose L. Mujica, President 6600 Sw 125th Avenue Miami, Florida 33183 Jose A. Mujica, Executive Director 6600 Sw 125th Avenue	Name and Title Address: Name and Title	6600 Sw 125th Avene Miami, Florida 33183 Angelica M. Mujica, Vice President 6600 Sw 125th Avenue	
Name and Title Address Name and Title Address	TIAL OFFICERS AND/OR DIRECTOR Jose L. Mujica, President 6600 Sw 125th Avenue Miami, Florida 33183 Jose A. Mujica, Executive Director 6600 Sw 125th Avenue	Name and Title Address: Name and Title Address:	6600 Sw 125th Avene Miami, Florida 33183 Angelica M. Mujica, Vice President 6600 Sw 125th Avenue Miami, Florida 33183	
Name and Title Address Name and Title Address	Jose A. Mujica, Executive Director 6600 Sw 125th Avenue Miami, Florida 33183 Jose A. Mujica, Executive Director 6600 Sw 125th Avenue Miami, Florida 33183	Name and Title Address: Name and Title Address: Name and Title	6600 Sw 125th Avene Miami, Florida 33183 Angelica M. Mujica, Vice President 6600 Sw 125th Avenue Miami, Florida 33183	

Name and	Title:	Name and Title:	
. Address		Address:	
ARTICLE VI The name and Flo	REGISTERED AGENT Orida street address (P.O. Box NOT acceptable) of Merce Les H. MuSica		
Address:	6600 SW/JSAUR MIAMI FLORIDA		FIL 13 JUN 20 SECRETARY TALLAHASSE
ARTICLE VII	INCORPORATOR		
The name and ad	dress of the Incorporator is:		PH D
Name:	Mercedes H. Mujica		STAT 3
Address:	6600 Sw 125th Avenue		iidm on a second
	Miami, Florida 33183		
	ed as registered agent to accept service of process m familiar with and accept the appointment as regional service. Required Signature/Registered Agent	istered agent and agree to act in th	
I submit this docu	ment and affirm that the facts stated herein are t epartment of State constitutes a third degree felony	rue. I am aware that the false inf	ormation submitted in a
Vuerel	1 -11	<u> </u>	2/5/20:13 Date