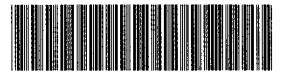
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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

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SUNCIPARY OF STATE

ALL MIASSEE, FLORIBA

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COVER LETTER

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

_{SUBJECT:} Muj	ica Divers Acade	emy, Inc.	
	(PROPOSED CORPORA	ATE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate o Status
		ADDITIONAL CC	T REQUIRED
FROM: M	ercedes H. Muji	ca	
	Nam	e (Printed or typed)	
66	300 Sw 125th Av	enue/	
		Address	
M	iami, Florida 331	183	
	City	, State & Zip	·-
30	5.598.7038		
	Daytime 7	Telephone number	

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

mujicafamily@comcast.net

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



June 10, 2013

MERCEDES H. MUJICA 6600 S.W. 125TH AVENUE MIAMI, FL 33183

SUBJECT: MUJICA DIVERS ACADEMY, INC.

Ref. Number: W13000033621

We have received your document for MUJICA DIVERS ACADEMY, 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.

Maryanne Dickey Regulatory Specialist II New Filing Section

Letter Number: 713A00014479

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

The name of the corpora	ME MUJICA DIVER	S ACAD	PEMY, INC
ARTICLE II PRI	NCIPAL OFFICE		
6600 Sw 12	Principal <u>street</u> address 5th AVENUE	SAM	Mailing address, if different is
		O/ (IV	
MIAMI, FLC	ORIDA 33183		
·			PATE O
ARTICLE III PUR	POSE To pro	vied	P
The purpose for which t	POSE the corporation is organized is: To pro- essons and in the future to als	so inclued a	a dive shop
			a dive shop.
```			
		<del></del>	
ARTICLE IV SHA	IRES 100		
The number of shares of	stock is: 100		
	<i>riaL officers and/or director</i> , Jose L. Mujica, President	<u>'S</u>	Mercedes H. Mujica, Secretary
Name and Title	* · · · · · · · · · · · · · · · · · · ·	Name and Title	::
Address	6600 Sw 125th Avenue	_ Address:	6600 Sw 125th Avene
	Miami, Florida 33183	_	Miami, Florida 33183
		-	
		_	
Name and Title:	Jose A. Mujica, Executive Director	Name and Title	Angelica M. Mujica, Vice President
Address	6600 Sw 125th Avenue	Address:	6600 Sw 125th Avenue
71001000	Miami, Florida 33183	_ /1441033.	Miami, Florida 33183
		-	
		•	
Name and Title:		Name and Title	, * <del></del>
Address		Address:	
		-	
		_	

Name and	Title:	Name and Title:	
Address		Address:	
	-		
	·		
ARTICLE VI	REGISTERED AGENT		
The name and Flo	rida street address (P.O. Box	NQT acceptable) of the registered agent is	2 7
Name:	Mercedes	H. MUJICA	THE PARTY
Address;	6600 S.W1.	DS Aug	STATE OF THE STATE
	MAMI	FC33/83	— — — — — — — — — — — — — — — — — — —
ARTICLE VII	<u>INCORPORATOR</u>		
The name and add	lress of the Incorporator is:		
Name:	Mercedes H	. Mujica	
Address:	6600 Sw 125th	Avenue	
	Miami, Florid	la 33183	
Having been name this certificate, I an	ed as registered agent to accept the familiar with and accept the	ot service of process for the above stated of appointment as registered agent and agre	corporation at the place designated in e to act in this capacity
Dull	cet Azu	Wi	0/15/2013
	Required Signature/Re	egistered Agent	Date
I submit this document to the De	nent and affirm that the fact partment of State constitutes	s stated herein are true. I con aware that a third fegree felony as provided for in s.8	the false information submitted in a
nune	W A Mul Required Signature	Morphoretor	11/5/2013
	day oo viewing	THE POLICE AND ADDRESS OF THE PROPERTY OF THE	Date