

P130000064990

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/10/13--01011--016 **70.00

13 AUG -2 PM 1:44
SECRETARY OF STATE
DIVISION OF CORPORATIONS

7/15

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W13-39840

COVER LETTER

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

SUBJECT: **Super Casas 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: **Rafaela Rosario**

Name (Printed or typed)

19211 Alice Cir

Address

Lutz, FL 33558

City, State & Zip

813 299 2013

Daytime Telephone number

carmenrosario60@yahoo.com

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

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 16, 2013

Thank You

RAFAELA ROSARIO
19211 ALICE CIR
LUTZ, FL 33588

SUBJECT: SUPER CASAS INC
Ref. Number: W13000039840

We have received your document for SUPER CASAS INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

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.

Jessica A Fason
Regulatory Specialist II

Letter Number: 213A00017237

RECEIVED
13 AUG -2 AM 10:23
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32399

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: Super Casas Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

19211 Alice Cir

Same

Lutz, Fl 33558

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to organize the business

ARTICLE IV SHARES 5000

The number of shares of stock is: 5000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: P/T Rafaela Rosario

Name and Title: _____

Address 19211 Alice Cir

Address: _____

Lutz, Fl 33558

Name and Title: VP/S Domingo Sanchez

Name and Title: _____

Address 4733 W Waters Ave

Address: _____

Tampa FL 33614

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

(conti.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Rafaela Rosario
Address: 19211 Alice Cir
Lutz, FL 33558

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Rafaela Rosario
Address: 19211 Alice Cir
Lutz, FL 33558

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SECRETARY OF STATE
DIVISION OF CORPORATION

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

Rafaela Rosario
Required Signature/Registered Agent

07/01/2013
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.

Rafaela Rosario
Required Signature/Incorporator

07/01/2013
Date