

P13000071639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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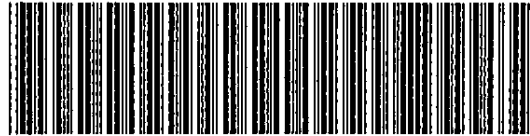
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
8/29/13

COVER LETTER

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

SUBJECT: **Balance Perfect Bookkeeping, Corp.**

(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

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: **Ivania Sotomayor**

Name (Printed or typed)

1944 SW 82nd Place

Address

Miami, FL 33155

City, State & Zip

305-401-1169

Daytime Telephone number

ivanias@sotomayor.org

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

The name of the corporation shall be: Balance Perfect Bookkeeping, Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1944 SW 82nd Place

Miami, FL 33155

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to transact any and all lawful business

ARTICLE IV SHARES 100

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ivania Sotomayor, President

Address: 1944 SW 82nd Place
Miami, FL 33155

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(conti.)

FILED

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Ivania Sotomayor
Address: 1944 SW 82nd Place
Miami, FL 33155

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Ivania Sotomayor
Address: 1944 SW 82nd Place
Miami, FL 33155

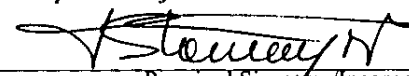
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

8/15/13

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.


Required Signature/Incorporator

8/15/13

Date