

PH000007938

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900255569959

01/15/14--01005--006 **70.00

FILED
14 JAN 15 AM 7:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: **E.R. INVESTMENT GROUP, 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
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: **EDWIN RAMIREZ**

Name (Printed or typed)

930 WEST 80TH PLACE

Address

HIALEAH, FL 33014

City, State & Zip

786-759-5011

Daytime Telephone number

E06RAMIREZ@YAHOO.COM

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: RAMIREZ INVESTMENT GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

930 WEST 80 TH PLACE

HIALEAH; FL 33014

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: EDWIN RAMIREZ

Name and Title: _____

Address 930 WEST 80 TH PLACE

Address: _____

HIALEAH, FL 33014

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
14 JAN 15 AM 7:47
TALLAHASSEE FLORIDA
SECRETARY OF STATE

(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: EDWIN RAMIREZ

Address: 930 WEST 80 TH PLACE

HIALEAH, FL 33014

ARTICLE VII INCORPORATOR

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

Name: EDWIN RAMIREZ

Address: 930 WEST 80 TH PLACE

HIALEAH, FL 33014

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

Edwin Ramirez
Required Signature/Registered Agent

01 / 10 / 14
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.

Edwin Ramirez
Required Signature/Incorporator

01 / 10 / 14
Date
JAN 15 AM 7:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA