

PIH 600027434

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

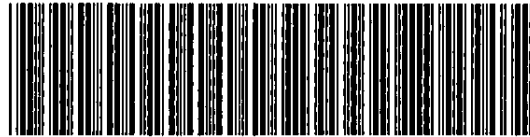
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700256607817

02/14/14--01004--007 **87.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 26 AM 10:08

~~PIH 600027434~~
FRA
CC
Cvs
3/28/14

COVER LETTER

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

SUBJECT: Let's Buy Miami, P.A.

(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: Alexandra Valentin

Name (Printed or typed)

1825 Ponce de Leon Blvd, PMB 285

Address

Miami, Florida 33134

City, State & Zip

305-310-1261

Daytime Telephone number

alexandravalentin@hotmail.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

February 18, 2014

ALEXANDRA VALENTIN
1825 PONCE DE LEON BLVD.
MIAMI, FL

SUBJECT: LET'S BUY MIAMI, P.A.
Ref. Number: W14000010607

We have received your document for LET'S BUY MIAMI, P.A. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific business purpose of the professional association must be stated in the document.

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.

Carol Mustain
Regulatory Specialist II

Letter Number: 314A00003651

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: LET'S BUY MIAMI, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1825 PONCE DE LEON BLVD, PMB285

MIAMI, FLORIDA 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: THE PRACTICE OF REAL ESTATE.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 26 AM 10:08

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ALEXANDRA VALENTIN, PRESIDENT

Name and Title: _____

Address 1825 PONCE DE LEON BLVD

Address: _____

MIAMI, FLORIDA 33134

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(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: ALEXANDRA VALENTIN
Address: 1825 PONCE DE LEON BLVD
MIAMI, FL 33134

ARTICLE VII INCORPORATOR

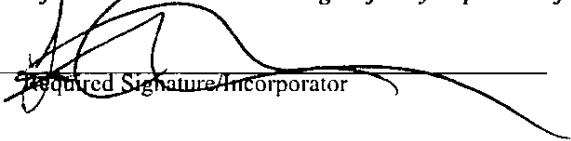
The **name and address** of the Incorporator is:

Name: LAURA C RODRIGUEZ, ESQ
Address: 1431 PONCE DE LEON BLVD
CORAL GABLES, FL 33134

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

 2/11/2014
Required Signature/Registered Agent 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.

 2/11/2014
Required Signature/Incorporator Date