

P 140000069188

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

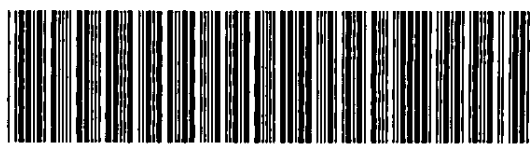
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500263260385

08/14/14--01008--001 \*\*70.00

FILED  
14 AUG 14 PM 4:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*gf* 8/19/14

**COVER LETTER**

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

**SUBJECT: Bernardo J. Araya, 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: Bernardo J. Araya**

Name (Printed or typed)

**11070 Baybreeze Way**

Address

**Boca Raton, FL 33428**

City, State & Zip

**561 703-3342**

Daytime Telephone number

**BernardoAraya2@aol.com**

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 AUG 14 PM 4: 24

FILED

**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)

FILED

**ARTICLE I NAME**

The name of the corporation shall be: Bernardo J. Araya, P.A.

14 AUG 14 PM 4: 24

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
Mailing address, if different is:

11070 Baybreeze Way  
Boca Raton, FL 33428

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Real estate and/or property management professional services.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Bernardo J. Araya, President Name and Title: \_\_\_\_\_

Address 11070 Baybreeze Way Address: \_\_\_\_\_  
Boca Raton, FL 33428

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

(cont.)

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:

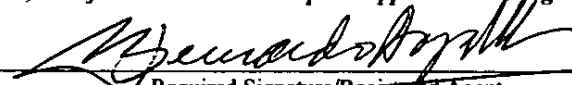
Name: Bernardo J. Araya  
 Address: 11070 Baybreeze Way  
Boca Raton, FL 33428

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Bernardo J. Araya  
 Address: 11070 Baybreeze Way  
Boca Raton, FL 33428

*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

8/11/14  
 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.*

  
 \_\_\_\_\_  
 Required Signature/Incorporator

8/11/14  
 Date

FILED  
 14 AUG 14 PM 4: 24  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA