

PH000075039

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE FL 32399

W14-51483

## COVER LETTER

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

SUBJECT: **Hector de la Canal 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: **Hector Santiago de la Canal**

Name (Printed or typed)

**495 Brickell Ave #702**

Address

**Miami, FL 33131**

City, State & Zip

**1(858)922-9365**

Daytime Telephone number

**hectorsdlc@gmail.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

RECEIVED

14 SEP -8 AM 11:37

SECRET  
TALLAHASSEE, FLORIDA

August 21, 2014

HECTOR SANTIAGO DE LA CANAL  
495 BRICKELL AVE #702  
MIAMI, FL 33131

SUBJECT: HECTOR DE LA CANAL P.A.  
Ref. Number: W14000051453

We have received your document for HECTOR DE LA CANAL P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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: 814A00018073

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: Hector de la Canal P.A.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

20445 Biscayne Blvd H-8  
Aventura, FL 33180

Mailing address, if different is:

495 Brickell Ave #702  
Miami, FL 33131

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Real Estate Agent

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000,000

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

Name and Title: Hector de la Canal. President

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

Address

495 Brickell Ave #702  
Miami, FL 33131

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

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

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

Address

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

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

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

Address

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

14 SEP -8 AM 7:39  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

(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: Hector de la Canal  
Address: 495 Brickell Ave #702  
Miami, FL 33131

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

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

Name: Hector de la Canal  
Address: 495 Brickell Ave #702  
Miami, FL 33131

*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

8/28/14  
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

8/14/14  
Date