

P15000013486

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CLERK OF STATE
TALLAHASSEE, FLORIDA

2 10-15 16

COVER LETTER

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

SUBJECT: _____
(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: Jose Paredes

Name (Printed or typed)

2876 Lantana Lakes Dr E

Address

Jacksonville, FL 32246

City, State & Zip

904-502-8213

Daytime Telephone number

Jose.Paredes@AOL.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: Jose and Isabel Paredes Consulting Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2876 Lantana Lakes Dr E

Jacksonville, FL 32246

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Medical Consulting

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jose Paredes, President

Name and Title: Isabel Paredes, Treasurer

Address 2876 Lantana Lakes Dr E
Jacksonville, FL 32246

Address: 2876 Lantana Lakes Dr E
Jacksonville, FL 32246

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: Jose Paredes

Address: 2876 Lantana Lakes Dr E

Jacksonville, FL 32246

ARTICLE VII INCORPORATOR

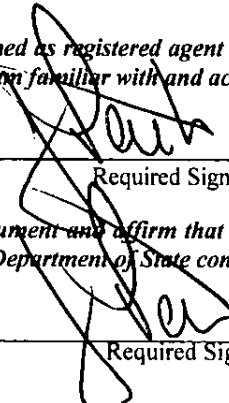
The name and address of the Incorporator is:

Name: Jose Paredes

Address: 2876 Lantana Lakes Dr E

Jacksonville, FL 32246

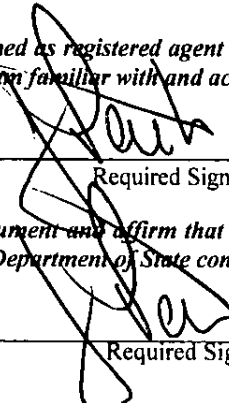
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

1/28/2015
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

1/28/2015
Date