P15000017992

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				





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02/23/15--01028--003 **78.75

SECRETARY OF STATE DIVISION OF CORPORATION:

T 02/24/15

COVER LETTER

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

Tallanassee, IL 323	'1 '		
_{suвјест:} <u>Rafa</u>	ael M. Regueiro,	P.A ATE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: R	afael M. Regueii		
41	Nam 101 S.W 108 Ave	e (Printed or typed)	
M	iami, Fl. 33165	Address	
78	City, 36-385-6280	, State & Zip	

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

rregueiro44@gmail.com

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

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporat	ion shall be: Rafael M. Reg	ueiro, P.A	
ARTICLE II PRINCIPAL OFFICE Principal street address 4101 S.W. 108 Ave Miami, FI, 33165		Mailing address	s, if different is:
		4101 SW 10	
		Miami, FI 33	165
ARTICLE III PUR The purpose for which the	he corporation is organized is: Real	Estate Services	
			15 15
			FEB
			PARY PF CO
			PA RPO
	DFC 4F00		PH 3: 36
The number of shares of	stock is: 1500		σ <u>χ</u>
ARTICLE V INIT	TIAL OFFICERS AND/OR DIRECTO).RS	
	Mauryn Regueiro	Name and Title:	
Address	4101 SW 108 AVe	Address:	
Addiess	Miami, FL 33165		
Name and Title:		Name and Title:	
Address		Address:	
		_	
Name and Title:		Name and Title:	
Address		Address:	<u></u>

Name and	d Title:	Name and Title:
Address		Address:
		-
ARTICLE VI	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable) or	of the registered agent is:
Name:	Maurvn Requeiro	
Address:	4101 SW 108 Ave	SECI VISIO
	Miami, FI 33165	EB 2:
ARTICLE VII	INCORPORATOR	LEO CORPORATION
The name and ad	<u>dress</u> of the Incorporator is:	3: 36
Name:	Rafael M. Regueiro	
Address:	4101 SW 108 ave	_
	Miami, FL 33165	_
Having been nam this certificate, I a	ned as registered agent to accept service of proces. Im familiar with and accept the appointment as re	s for the above stated corporation at the place designated in gistered agent and agree to act in this capacity
Main	Leave	1/30/2015
	Required Signature/Registered Agent	Date
I submit this doci	ument and affirm that the facts stated herein are Department of State constitutes a third degree felor	true. I am aware that the false information submitted in a y y as provided for in s.817.155, F.S.
1(())	}	1/30/2015
7	Required Signature/Incorporator	Date