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15 MAR 16 PM 4:44

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COVER LETTER

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

SUBJECT: Irama Valdes, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

→ enclosed.
-14-

FROM: Irama Valdes

Name (Printed or typed)

12270 SW 94 Street

Address

Miami, FL 33186

City, State & Zip

786-671-7829

Daytime Telephone number

irama.law@gmail.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: Irama Valdes, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

19 West Flagler Street

Suite 720

Miami, FL 33130

Mailing address, if different is:

12270 SW 94 Street

Miami, FL 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

LEGAL SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Irama Valdes, President

Address: 12270 SW 94 Street

Miami, FL 33186

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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DIVISION OF CORPORATIONS
15 MAR 16 PM 4:44

(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: Irama Valdes
Address: 12270 SW 94 Street
Miami, FL 33186


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ARTICLE VII INCORPORATOR

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

Name: Irama Valdes
Address: 12270 SW 94 Street
Miami, FL 33186


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

3/12/15
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

3/12/15
Date