

P 15000046757

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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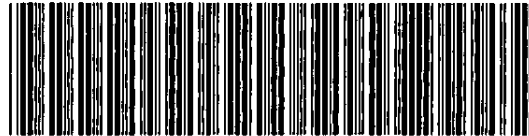
(Business Entity Name)

(Document Number)

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05/21/15--01004--018 **87.50

FILED
15 MAY 21 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5/27/15

COVER LETTER

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

SUBJECT: STUDIO S.R. ARCHITECTURE & DESIGN, INC.
(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

FROM: RAFAEL RODRIGUEZ
Name (Printed or typed)

44 COCONUT ROW, UNIT T-6
Address

PALM BEACH, FLORIDA 33480
City, State & Zip

(561) 818-1152 (561) 312-5921
Daytime Telephone number

CR/AND RAFAEL@RARARCHITECT.COM (lower case)
RADHAEL@SIADRIAS.NET (lower case)
E-mail address: (to be used for future annual report notification)

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

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15 MAY 21 PM 3:19
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE 06/01/15

ARTICLES OF INCORPORATION

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

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ARTICLE I NAME

The name of the corporation shall be: STUDIO S.R. ARCHITECTURE & DESIGN, INC. MAY 15, PM 3:19

ARTICLE II PRINCIPAL OFFICE

Principal street address

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

44 COCONUT ROW
PALM BEACH, FL. 33480

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ARCHITECTURAL OFFICE TO
PRACTICE ARCHITECTURE.

ARTICLE IV SHARES

The number of shares of stock is: 20

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PRESIDENT ~~RAFAEL SALADRIGAS~~

Address: RAFAEL SALADRIGAS

400 27TH ST.

WEST PALM BEACH, FL. 33407

Name and Title: VICE PRESIDENT

Address: RAFAEL RODRIGUEZ

233 34TH ST.

WEST PALM BEACH, FL. 33407

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: RAFAEL RODRIGUEZ

Address: 44 COCONUT ROW, UNIT T-6
PALM BEACH, FL 33480

ARTICLE VII INCORPORATOR

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

Name: RAFAEL RODRIGUEZ

Address: 44 COCONUT ROW UNIT T-6
PALM BEACH, FL 33480

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15 MAY 21 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 6/1/15 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Rafael Rodriguez
Required Signature/Registered Agent

5/15/15
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.

Rafael Rodriguez
Required Signature/Incorporator

5/15/15
Date