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(Re	questor's Name)			
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	: #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Do	cument Number)	,		
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			

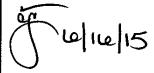
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COVER LETTER

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

SUBJECT: Jose	e Tadeu C. Ferreira, P.A.		
obbiter	(PROPOSED CORPORA)	ΓΕ NAME – <u>MUST INCL</u>	JDE SUFFIX)
Enclosed are an	original and one (1) copy of the artic	cles of incorporation and	l a check for:
☐ \$70.0 Filing Fo		□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
•			
FROM:	Jose Tadeu Cavalini Ferreira		
		(Printed or typed)	
	7441 Wayne Ave., #2i		
	A	Address	
	Miami Beach, FL 33141		₩ 5
	City,	State & Zip	
	305-343-2937		
	Daytime Te	elephone number	TO P C
	tadeu_f@hotmail.com		4: 20
	E-mail address: (to be used	for future annual report r	otification)

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)

FILED

	1 11 1			15	JUN	11	PH	4: 2
<u>article II — Princi</u> I	on shall be: Jose Tadeu C. Ferreira, P.A.	Mailin	g address, i					
7441 Wayne Ave., # 2i		-						-
Miami Beach, FL 33141				•				-
ARTICLE III PURPO. The purpose for which th	SE e corporation is organized is:	sulting and legal service	es					_
						***		_
1.4.00								_
								_
								- -
ARTICLE IV SHARE The number of shares of s	<u>3</u> 100 tock is:							
The number of shares of s . ARTICLE V INITIAL	L OFFICERS AND/OR DIRECTORS Love Today Cayakini Forming (Provident							
The number of shares of s . ARTICLE V INITIAL Name and Title:	LOFFICERS AND/OR DIRECTORS Jose Tadeu Cavalini Ferreira/President	Name and Title:						-
The number of shares of s ARTICLE V INITIAL Name and Title: Address	L OFFICERS AND/OR DIRECTORS Jose Tadeu Cavalini Ferreira/President							-
The number of shares of s ARTICLE V INITIAL Name and Title: Address	LOFFICERS AND/OR DIRECTORS Jose Tadeu Cavalini Ferreira/President 7441 Wayne Ave, #2i Miami Beach, FL 33141	Name and Title: Address:						-
The number of shares of s ARTICLE V INITIAL Name and Title: Address Name and Title:	LOFFICERS AND/OR DIRECTORS Jose Tadeu Cavalini Ferreira/President 7441 Wayne Ave, #2i Miami Beach, FL 33141	Name and Title: Address: Name and Title:						-
The number of shares of s ARTICLE V INITIAL Name and Title: Address	LOFFICERS AND/OR DIRECTORS Jose Tadeu Cavalini Ferreira/President 7441 Wayne Ave, #2i Miami Beach, FL 33141	Name and Title: Address: Name and Title:						-
The number of shares of s ARTICLE V INITIAL Name and Title: Address Name and Title: Address	Jose Tadeu Cavalini Ferreira/President 7441 Wayne Ave, #2i Miami Beach, FL 33141	Name and Title: Address: Name and Title: Address:						-
Name and Title: Address Name and Title: Address	LOFFICERS AND/OR DIRECTORS Jose Tadeu Cavalini Ferreira/President 7441 Wayne Ave, #2i Miami Beach, FL 33141	Name and Title: Address: Name and Title: Address:						-

Name ar	nd Title:	Name and Title:
Address	S	Address:
	REGISTERED AGENT Iorida street address (P.O. Box NOT accept	table) of the registered agent is:
Name:	Jose Tadeu Cavalini Ferreira	table) of the registered agent is.
Address:	7441 Wayne Ave, #2i	क क
	Miami Beach, FL 33141	
ARTICLE VII	INCORPORATOR	
The name and a	ddress of the Incorporator is:	
Name: Address:	Jose Tadeu Cavalini Ferreira	4 20
	7441 Wayne Ave, #2i	
	Miami Beach, FL 33141	_
Effective date, if		. (OPTIONAL) d cannot be more than five business days prior or 90 business
	e inserted in this block does not meet the ap effective date on the Department of State's I	plicable statutory filing requirements, this date will not be listed as ecords.
Having been na this certificate, I	med as registored agent to accept service of am familiar with and accept the appointme	process for the above stated corporation at the place designated in process for the above stated corporation at the place designated in
//	y ~	6/10/2015
	Required Signature/Registered Ag	gent Date
	coment and affirm that the facts stated he Department of State constitutes a third deg	ein are true. I am aware that the false information submitted in a see felony as provided for in s.817.155, F.S.
	X N	
/R'eau	ired Signature/Incorporator	6/10/70/5 Date
//		