

P15000056963

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

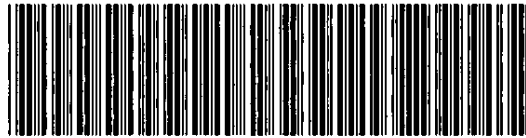
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07/02/15--01006--025 **87.50

EFFECTIVE DATE
7-1-15

FILED
2015 JUL -2 AM 11:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL - 8 2015

T. BROWN

COVER LETTER

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

SUBJECT: 305 Beach Rentals, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Joaquin Cortizo

Name (Printed or typed)

739 2nd ST, # 8

Address

Miami Beach, FL 33139

City, State & Zip

786-543-6604

Daytime Telephone number

joey@305beachrentals.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)

FILED
2015 JUL -2 AM 11:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: 305 Beach Rentals, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

739 2nd ST, # 8

Miami Beach, FL 33139

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____ to engage or transact in any lawful business act or activity.

EFFECTIVE DATE

7-1-15

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joaquin Cortizo, President

Address 739 2nd ST, # 8

Miami Beach, FL 33139

Name and Title:

Address:

Patricia Cole, secretary
390 N.W. 86 court #6
Miami, FL 33126

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

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: Joaquin Cortizo

Address: 739 2nd ST, # 8

Miami Beach, FL 33139

ARTICLE VII INCORPORATOR

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

Name: Joaquin Cortizo

Address: 739 2nd ST, # 8

Miami Beach, FL 33139


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: July 1, 2015 (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.

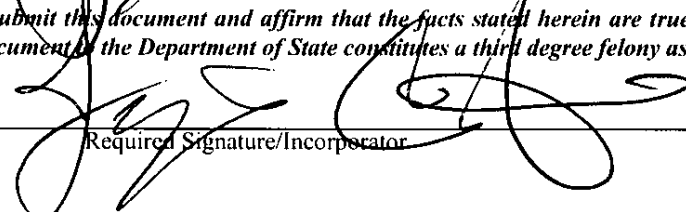
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

7-1-2015
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

7-1-2015
Date