

P15000060216

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

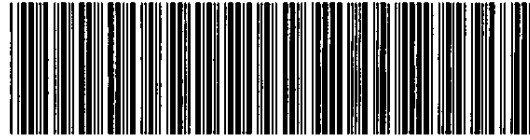
(Document Number)

Certified Copies _____ Certificates of Status

Special Instructions to Filing Officer:

~~015-46258~~

Office Use Only



200274720732

07/06/15--01014--021 **78.75

EFFECTIVE DATE
7-13-15

2015 JUL 20 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

JUL 21 2015

COVER LETTER

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

SUBJECT: Jorge Padilla, 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 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

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

FROM: Jorge Padilla
Name (Printed or typed)

9390 SW 98 St
Address

Miami, FL 33176
City, State & Zip

305-469-4358
Daytime Telephone number

jorgepad23@gmail.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 9, 2015

JORGE PADILLA
9390 SW 98 STREET
MIAMI, FL 33176

SUBJECT: JORGE PADILLA, P.A.
Ref. Number: W15000046258

15 JUL 20 PM 12:44

RECEIVED

We have received your document for JORGE PADILLA, P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific business purpose of the professional association must be stated in the document.

The document must contain a registered agent with a Florida street address.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Teresa Brown
Regulatory Specialist II

Letter Number: 615A00014344

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

FILED
2015 JUL 20 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: Jorge Padilla, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different

9390 SW 98 ST

Miami, FL 33176

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide legal services

EFFECTIVE DATE

7-13-15

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jorge Padilla, President Name and Title: _____

Address 9390 SW 98 ST Address: _____

Miami, FL 33176 _____

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: Jorge Padilla
 Address: 9390 SW 98 ST
Miami, FL 33176

ARTICLE VII INCORPORATOR

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

Name: Jorge Padilla
 Address: 9390 SW 98 ST
Miami, FL 33176

ARTICLE VIII EFFECTIVE DATE: 7/13/2015

Effective date, if other than the date of filing: _____ (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 7/16/2015

 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 7/16/2015

 Date