

P15000071748

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

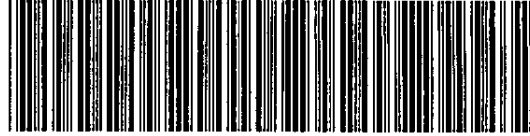
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/24/15--01006--017 **70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 AUG 24 PM 3:30

APPROVED
AND
FILED

COVER LETTER

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

SUBJECT: ANDINA REALTY 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
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: ANDINA REALTY INC.

Name (Printed or typed)

1414 Collins Ave.

Address

Miami Beach, Florida 33139

City, State & Zip

305-244-5566

Daytime Telephone number

alfredoplat@gmail.com

E-mail address: (to be used for future annual report notification)

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

APPROVED
AND
FILED

ARTICLES OF INCORPORATION

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

15 AUG 24 PM 3:30

ARTICLE I NAME

The name of the corporation shall be: ANDINA REALTY INC.

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address
1414 Collins Ave.
Miami Beach, Florida 33139

Mailing address, if different is:
same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate Services and Investments.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Alfredo Plat - Managing Member</u>	Name and Title:	<u>Juan Pablo D'Onofrio - Member</u>
Address	<u>1414 Collins Ave.</u> <u>Miami Beach, Florida 33139</u>	Address:	<u>1414 Collins Ave.</u> <u>Miami Beach, Florida 33139</u>
Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____

APPROVED
AND
FILED

15 AUG 24 PM 3:31

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Alfredo Plat

Address: 1414 Collins Ave.

Miami Beach, Florida 33139

ARTICLE VII INCORPORATOR

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

Name: Alfredo Plat

Address: 1414 Collins Ave.

Miami Beach, Florida 33139

ARTICLE VIII EFFECTIVE DATE:

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

8/20/15
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

8/20/15
Date