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Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850)617-6381

From:  
Account Name : CLARA GIRALDO, P.A.  
Account Number : I19990000017  
Phone : (305)485-9300  
Fax Number : (305)485-1098

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address:

*This Corporation will start operating on January 1<sup>st</sup>, 2016*

**FLORIDA PROFIT/NON PROFIT CORPORATION  
LUIS E. MOSQUERA P.A**

Certificate of Status	0
Certified Copy	1
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 6, 2015

CLARA GIRALDO, P.A.

SUBJECT: LUIS E. MOSQUERA P.A  
REF: W15000066137

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Please accept our apology for failing to mention this in our previous letter.

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

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.

Jessica A Fason  
Regulatory Specialist II

FAX Aud. #: H15000235836  
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P.O BOX 6327 - Tallahassee, Florida 32314

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION

OF

LUIS E. MOSQUERA P.A

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporate, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

ARTICLE I

The name of this corporation shall be:

LUIS E. MOSQUERA P.A

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) Transact any and all lawful business.
- (2) Said corporation shall further have powers:

To have perpetual succession by its corporate

name: *The specific nature of business is: Real Estate*

LUIS E. MOSQUERA P.A

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ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$10.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

**LUIS MOSQUERA  
14816 SW 31 TERRACE  
MIAMI, FL 33185**

The principal office shall be:

**14816 SW 31 TERRACE  
MIAMI, FL 33185**

**CLARA GIRALDO P.A.  
4080 SW 84 AVE SUITE C  
MIAMI, FL 33155  
(305) 485-9300**

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ARTICLE VI

The initial Board of Directors shall consist of a total of **ONE(01)** person, and the name and address of the persons who is to serve as initial directors is :

**LUIS MOSQUERA  
14816 SW 31 TERRACE  
MIAMI, FL 33185**

**PRESIDENT**

The name and address of the incorporator executing these Articles of Incorporation is

**LUIS MOSQUERA  
14816 SW 31 TERRACE  
MIAMI, FL 33185**

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of Incorporation this 29 day of **SEPTEMBER**, 2015.

  
\_\_\_\_\_  
**LUIS MOSQUERA**

ARTICLE VII

**THIS CORPORATION WILL START OPERATING ON JANUARY 1<sup>ST</sup>, 2016**

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**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT / REGISTERED OFFICE**

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, Submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The Name of the corporation is:

**LUIS E. MOSQUERA P.A**

2. The Name and Address of the registered agent and office is:

**LUIS MOSQUERA  
14816 SW 31 TERRACE  
MIAMI, FL 33185**

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES. AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE



Dated: SEPTEMBER 29, 2015.