

AL500091815

Florida Department of State

Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION
LAW OFFICES OF ARMANDO G. HERNANDEZ P.A.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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TALLAHASSEE, FLORIDA

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#1771 P.002/003
No. 9617 P. 2

H15000268673

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

ARTICLE I NAME LAW OFFICES OF ARMANDO G. HERNANDEZ P.A.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
2899 COLLINS AVENUE, APT 633
MIAMI BEACH, FL 33140

Mailing address, if different is:
2899 COLLINS AVENUE, APT 633
MIAMI BEACH, FL 33140

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: LAW OFFICES

ARTICLE IV SHARES 100
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ARMANDO G HERNANDEZ

Address: PRESIDENT

2899 COLLINS AVENUE, APT 633

MIAMI BEACH, FL 33140

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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No. 9617 P. 3

H15000268673

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: ARMANDO G. HERNANDEZ
Address: 2899 COLLINS AVENUE, APT 633
MIAMI BEACH, FL 33140

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ARMANDO G. HERNANDEZ
Address: 2899 COLLINS AVENUE, APT 633
MIAMI BEACH, FL 33140

ARTICLE VIII EFFECTIVE DATE

Effective date, if other than the date of filing: NOVEMBER 10 DE 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

X [Signature]
Required Signature/Registered Agent

11/10/2015

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.

X [Signature]
Required Signature/Incorporator

11/10/2015

Date

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