

PI 5000097387

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15 DEC -1 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: CAPITAL FINANCIAL ACCOUNTING 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

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: FATIMA LACAYO

Name (Printed or typed)

3570 SW 107 COURT

Address

MIAMI, FL. 33165

City, State & Zip

(305) 336-9710

Daytime Telephone number

fatimalacayo@capitalfinancialaccounting.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)

ARTICLE I NAME

The name of the corporation shall be: CAPITAL FINANCIAL ACCOUNTING INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
3570 SW 107 COURT
MIAMI, FL. 33165

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PRESIDENT

Address ISMAEL MARADIAGA
3570 SW 107 COURT
MIAMI, FL. 33165

Name and Title: VICE PRESIDENT

Address: FATIMA LACAYO
3570 SW 107 COURT
MIAMI, FL. 33165

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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15 DEC -1 PM 4:03
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

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: FATIMA LACAYO
Address: 3570 SW 107 COURT
MIAMI, FL. 33165

ARTICLE VII INCORPORATOR

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

Name: FATIMA LACAYO
Address: 3570 SW 107 COURT
MIAMI, FL. 33165

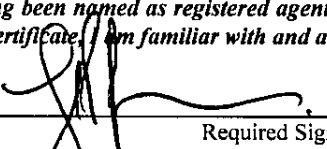
ARTICLE VIII EFFECTIVE DATE:

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

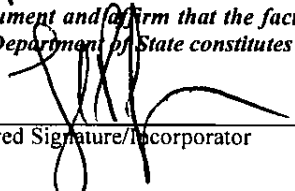


Required Signature/Registered Agent

11/24/15

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

11/24/15

Date