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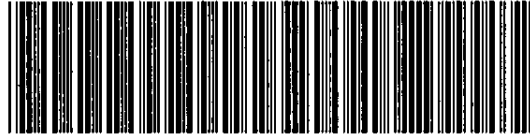
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC -9 2015

COVER LETTER

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

SUBJECT: C. D. U. STAT, 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: Joseph J. Portuondo, Esq.

Name (Printed or typed)

110 Merrick Way, Suite 3-B

Address

Coral Gables, FL 33134

City, State & Zip

(305) 666 - 6640

Daytime Telephone number

jjp@portuondolaw.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: C.D.U. Stat., Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

110 Merrick Way

Suite 3-B

n/a

Coral Gables, FL 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To Perform all lawful business in the State of Florida

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TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jose M. Gonzalez, PRESIDENT

Name and Title: Jose E. Portuondo, SECRETARY

Address 110 Merrick Way

Address: 110 Merrick Way

Suite 3-B

Suite 3-B

Coral Gables, FL 33134

Coral Gables, FL 33134

Name and Title: n/a

Name and Title: n/a

Address

Address:

Name and Title: n/a

Name and Title: n/a

Address

Address:

Name and Title: n/a Name and Title: n/a
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Joseph J. Portuondo, Esq.
Address: 110 Merrick Way, Suite 3-B
Coral Gables, FL 33134

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Joseph J. Portuondo, Esq.
Address: 110 Merrick Way, Suite 3-B
Coral Gables, FL 33134

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
November 30, 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
November 30, 2015
Date