

PI6000023714

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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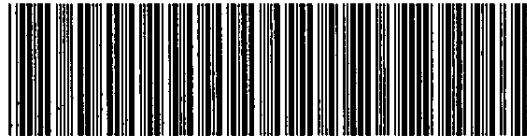
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/08/16--01023--003 **78.75

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16 MAR - 8 PM 2:50
03/08/16

MAR - 8 2016

S. PRATHER

COVER LETTER

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

SUBJECT: CARRERAS 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 ☒ \$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: JOHNNY CARRERAS

Name (Printed or typed)

16140 OKEECHOBEE BLVD

Address

LOXAHATCHEE, FL 33470

City, State & Zip

561-452-4680

Daytime Telephone number

JOHNNYCARRERAS@YAHOO.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: CARRERAS REALTY, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

16140 OKEECHOBEE BLVD

LOXAHATCHEE

FLORIDA 33470

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE AND ANYTHING RELATED TO THAT BUSSINESS

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOHNNY CARRERAS/DIRECTOR

Name and Title: _____

Address 16140 OKEECHOBEE BLVD

Address: _____

LOXAHATCHEE

FLORIDA 33470

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FL

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: JOHNNY CARRERAS

Address: 16140 OKEECHOBEE BLVD

LOXAHATCHEE, FLORIDA 33470

ARTICLE VII INCORPORATOR

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

Name: JOHNNY CARRERAS

Address: 16140 OKEECHOBEE BLVD

LOXAHATCHEE, FLORIDA 33470

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SECRETARY OF STATE
ALLAHBACH

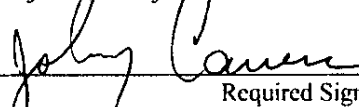
ARTICLE VIII EFFECTIVE DATE:

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.)

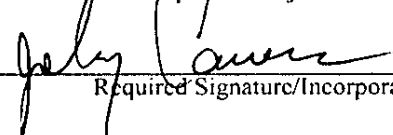
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

02-18-2016
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

02-18-2016
Date