P16000044369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: PAULA RUBIN REAL ESTATE P.A.
(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 Filing Fee	■ $78.75 Filing Fee & Certificate of Status	☐ $78.75 Filing Fee & Certified Copy	☐ $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: MARIA PAULA RUBIN
Name (Printed or typed)

11127 DES MOINES COURT
Address

COOPER CITY, FL. 33026
City, State & Zip

305-527-0430
Daytime Telephone number

MPAULARUBIN@GMAIL.COM
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 10, 2016

MARIA PAULA RUBIN
11127 DES MOINES CT
COOPER CITY, FL 33026

SUBJECT: PAULA RUBIN REAL ESTATE P.A.
Ref. Number: W16000034054

We have received your document for PAULA RUBIN REAL ESTATE P.A. and your check(s) totaling $78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

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

Letter Number: 516A00009830

367358

RECEIVED
16 MAY 19 PM 12:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: PAULA RUBIN REAL ESTATE P.A.

ARTICLE II PRINCIPAL OFFICE

Principal **street** address

11127 DES MOINES COURT

COOPER CITY, FL. 33026

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARIA PAULA RUBIN, PRESIDENT

Address: 11127 DES MOINES COURT
COOPER CITY, FL. 33026

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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16 MAY 19 AM 10:13
SECRETARY OF STATE
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: LUIS G. BRITO

Address: 407 LINCOLN ROAD, SUITE 9A

MIAMI, FL 33139

ARTICLE VII INCORPORATOR

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

Name: MARIA PAULA RUBIN

Address: 11127 DES MOINES COURT

COOPER CITY, FL 33026

4/26/16

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

_____ 4-26-16

Required Signature/Registered Agent 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.

_____ 4/26/16

Required Signature/Incorporator Date