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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION
CARLOS D. GOMEZ, 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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PAGE 01/04



June 15, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAZARUS ***2ND FAX

SUBJECT: CARLOS D. GOMEZ, P.A.
REF: W16000042747

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The specific business purpose of the professional association must be stated in the document.

If you have any further questions concerning your document, please call (850) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

FAX Aud. #: H16000142619
Letter Number: 716A00012359

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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H16000142619

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

ARTICLE I NAMEThe name of the corporation shall be: CARLOS D. GOMEZ, P.A**ARTICLE II PRINCIPAL OFFICE**Principal street address2423 SW 147 AVE
#213
MIAMI, FL 33185

Mailing address, if different is:

same as Principal**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: To consult several
different security companies.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE IV SHARESThe number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: CARLOS DAVID GOMEZ (P)Address: 2423 SW 147 AVE #213
MIAMI FL 33185

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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(cont.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Carlos David Gomez
Address: 2423 SW 147 Ave # 213
Miami FL 33185

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Carlos David Gomez
Address: 2423 SW 147 Ave #213
Miami FL 33185

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

[Signature]
Required Signature/Registered Agent

6/10/16
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.

[Signature]
Required Signature/Incorporator

6/10/16
Date

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