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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

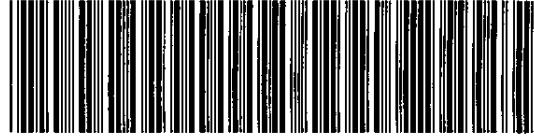
(Business Entity Name)

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COVER LETTER

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

SUBJECT: MARICELA RODRIGUEZ "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: MARICELA RODRIGUEZ
Name (Printed or typed)
4875 NW 178 TERRACE
Address
MIAMI GARDENS, FL, 33055
City, State & Zip
786-267-7222
Daytime Telephone number
DRAMARYRODRIGUEZ@GMAIL.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: MARICELA RODRIGUEZ "P.A."

ARTICLE II PRINCIPAL OFFICE

Principal street address
4875 NW 178 TE
MIAMI MARDENS, FL 33055

Mailing address, if different is:
4875 NW 178 TE
MIAMI GARDENS, FL, 33055

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO DO REAL ESTATE SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 100

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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARICELA RODRIGUEZ-DIRECTOR Name and Title: _____
Address: 4875 NW 178 TE Address: _____
MIAMI GARDENS, FL, 33055 _____

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

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

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: MARICELA RODRIGUEZ
 Address: 4875 NW 178 TERRACE
MIAMI GARDENS, FL, 33055

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ARTICLE VII INCORPORATOR

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

Name: MARICELA RODRIGUEZ
 Address: 4875 NW 178 TERRACE
Miami Gardens, FL, 33055

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 06/23/2016 (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 06/23/2016

 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 06/23/2016

 Date