

P16000061536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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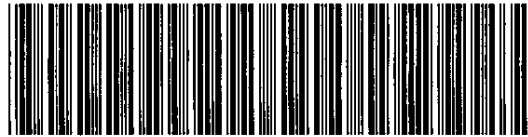
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF SUPERIOR COURT
JUL 18 AM 11:50
JUL 18 2016

EFFECTIVE DATE 07/19/16

07/26/16

COVER LETTER

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

SUBJECT: ROMA SEQUEIRA CORP.

(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: HORACIO SEQUEIRA

Name (Printed or typed)

4057 EAST 8TH AVENUE

Address

HIALEAH, FL 33013

City, State & Zip

786-468-1792

Daytime Telephone number

centrolatinos@hotmail.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: ROMA SEQUEIRA CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4057 EAST 8TH AVENUE HIALEAH FL, 33013

13280 PORT SAID ROAD C301 OPALOCKA

FL. 33054

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Legal expenses, Paralegal services, tax preparation, insurance services,
Real Estate Services, local and international commerce and to engage in any lawful activity inside of United States and outside
of United States of America.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Horacio Sequeira President

Name and Title: _____

Address 4057 East 8th Avenue Hialeah Fl. 33013

Address: _____

Name and Title: Gloria Romero Vice-President

Name and Title: _____

Address 13280 Port Said Road C301 Opa locka Fl.
33054

Address: _____

Name and Title: Carmensa Matilde Argenal Vallejos Treasu

Name and Title: _____

Address 13280 Port Said Road C301 Opa Locka Fl.
33054

Address: _____

Name and Title: Ritzer Alexander Sequeira- Secretary Name and Title: _____
Address: 13280 Port Said Road C301 Opa Locka Fl, Address: _____
33054 _____

ARTICLE VI REGISTERED AGENT

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

Name: Horacio Sequeira
Address: 4057 East 8th Avenue Hialeah Fl. 33013

ARTICLE VII INCORPORATOR

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

Name: Horacio Sequeira
Address: 4057 East 8th Avenue Hialeah Fl. 33013

FILED
SECRETARY OF STATE
JUL 19 2016
16 JUL 19 5:41:50

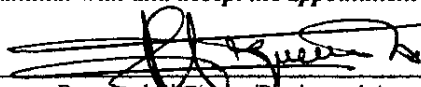
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: July 19, 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

07/12/2016
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

07/12/2016
Date