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PICK-UP WAIT MAIL

(Business Entity Name)

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2016 AUG 29 PM 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

MANUEL COLLADA P.A.

SUBJECT: _____
(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: MANUEL COLLADA

Name (Printed or typed)

13733 SW 26 ST

Address

MIRAMAR, FL 33027

City, State & Zip

305-335-7403

Daytime Telephone number

IVONNECOLLADA@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)

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ARTICLE I NAME MANUEL COLLADA P.A.

The name of the corporation shall be:

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ARTICLE II PRINCIPAL OFFICE

Principal street address

MAILING ADDRESS, IF DIFFERENT IS:
STATE
FLORIDA

13733 SW 26 ST

MIRAMAR FL 33027

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE BROKERAGE AND RELATED SERVICES

ARTICLE IV SHARES 100

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MANUEL COLLADA - OWNER

Name and Title: _____

Address 13733 SW 26 ST

Address: _____

MIRAMAR FL 33027

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: MANUEL COLLADA
Address: 13733 SW 26 ST
MIRAMAR FL 33027

ARTICLE VII INCORPORATOR

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

Name: MANUEL COLLADA
Address: 13733 SW 26 ST
MIRAMAR FL 33027

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.)

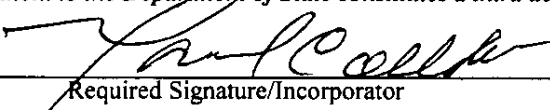
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

8/23/16
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.


Required Signature/Incorporator

8/23/16
Date