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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION
RAOUL LOPEZ PA

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$78.75

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OCT 19 2016

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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:

RAOUL LOPEZ PA

ARTICLE II PRINCIPAL OFFICE

Principal street address

3211 PONCE DE LEON #201

Coral Gables FL 33134

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: RAOUL E. LOPEZ (P)

Name and Title:

Address

3211 Ponce de Leon

Address:

#201

Coral Gables, FL

33134

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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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: RAOUL LOPEZ
Address: 3211 Ponce de Leon #201
Coral Gables FL 33134

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: RAOUL LOPEZ
Address: 3211 Ponce de Leon #201
Coral Gables FL 33134

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

Raul Lopez
Required Signature/Registered Agent

10/18/2016
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.

Raul Lopez
Required Signature/Incorporator

10/18/2016
Date

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