

P16000087734

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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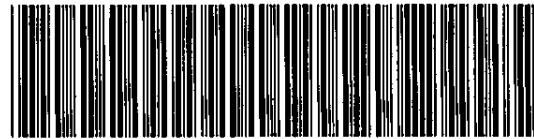
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: EMPIRE REALTY & ASSOCIATES, INC.

(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: EILEEN AGUILAR

Name (Printed or typed)

648 WEST 84TH STREET

Address

HIALEAH, FLORIDA 33014

City, State & Zip

305-215-0011

Daytime Telephone number

eileenaguilar@comcast.net

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: EMPIRE REALTY & ASSOCIATES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

648 WEST 84TH STREET

16741 NW 78TH COURT

HIALEAH, FLORIDA 33014

MIAMI LAKES, FLORIDA 33016

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: EILEEN AGUILAR, PRES./SEC./TREAS

Name and Title: _____

Address 648 WEST 84TH STREET

Address: _____

HIALEAH, FLORIDA 33014

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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

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2016 OCT 28 AM 10:40
CLERK OF THE STATE
HIALEAH, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: EILEEN AGUILAR
Address: 648 WEST 84TH STREET
HIALEAH, FLORIDA 33014

ARTICLE VII INCORPORATOR

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

Name: EILEEN AGUILAR
Address: 648 WEST 84TH STREET
HIALEAH, FLORIDA 33014

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

10/24/2016

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

10/24/2016

Date