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2016 OCT 24 AM 9:13  
CLERK OF SUPERIOR COURT  
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

16 NOV 21 PM 1:43

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

October 26, 2016

CRISTIAN CHAVEZ  
12145 SW 251 TER  
PRINCETON, FL 33032

SUBJECT: CRISTIAN CHAVEZ PA  
Ref. Number: W16000072711

We have received your document for CRISTIAN CHAVEZ PA and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Nadira D McClees-Sams  
Regulatory Specialist II

Letter Number: 116A00022958

2016 OCT 24 AM 9:13  
FROM: NADIRA D MCCLEES-SAMS  
TO: CRISTIAN CHAVEZ  
SUBJECT: CRISTIAN CHAVEZ PA

## COVER LETTER

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

SUBJECT: \_\_\_\_\_

*Cristian Chavez PA*

(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: \_\_\_\_\_

*Cristian Chavez*

Name (Printed or typed)

*12145 SW 251 TER*

Address

*Princeton, FL, 33032*

City, State & Zip

*(786) 214-1087*

Daytime Telephone number

*CristianChavez-Realtor@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: Cristian Chavez PA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

12145 SW 251 ter  
Princeton FL 33032

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real estate services.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2016 OCT 24 AM 9:13  
CLERK OF DISTRICT COURT  
CLERK OF DISTRICT COURT

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Cristian Chavez, Name and Title: \_\_\_\_\_

Address: President Address: \_\_\_\_\_

12145 SW 251 ter  
Princeton, FL 33032

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: Cristian Chavez

Address: 12145 SW 251 ter  
Princeton FL 33032

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FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Cristian Chavez

Address: 12145 SW 251 ter  
Princeton FL 33032

**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

10/17/16  
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

10/17/16  
Date