

2/2016

Division of Corporations

Florida Department of State  
Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
ROA & ASSOCIATES FINANCE CONSULTING CORP**

Certificate of Status	0
Certified Copy	1
Page Count	04
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**S GILBERT**

**DEC 13 2016**

Electronic Filing Menu

Corporate Filing Menu

Help

**AFFIDAVIT**

BEFORE ME, the undersigned authority, on this day personally appeared, EDUARDO J. RODRIGUEZ who after being first duly sworn, under oath, deposes and says:

1. He undersigned is the President of ROA & ASSOCIATES FINANCE CONSULTING CORP a Florida corporation, filed with the Florida Department of State on OCTOBER 23, 2015.
2. The undersigned hereby consents to and authorizes the use of the name ROA & ASSOCIATES FINANCE CONSULTING CORP to EDUARDO J. RODRIGUEZ for the purpose of incorporating a new entity.
3. The undersigned has personal knowledge of the facts and matters set forth herein and therefore has no intentions of reinstating the Dissolved entity.

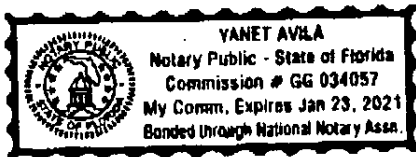
FURTHER AFFIANT SAYETH NAUGHT.

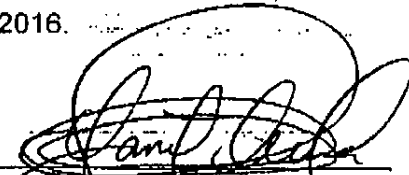
  
 \_\_\_\_\_  
 EDUARDO J. RODRIGUEZ

STATE OF FLORIDA                    )  
   ) SS:  
 COUNTY OF MIAMI-DADE         )

PERSONALLY appeared before me, EDUARDO J. RODRIGUEZ who is personally known to me, who being by me first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

WITNESS my hand and seal this 12 day of DEC, 2016.



  
 \_\_\_\_\_  
 Notary Public

**ARTICLES OF INCORPORATION**

16 DEC 12 PM 6:57

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be: ROA & ASSOCIATES FINANCE CONSULTING CORP

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

1550 NE 191 ST APT: 109

N. MIAMI BEACH, FL 33139

**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: EDUARDO J. RODRIGUEZ (P)

Name and Title: \_\_\_\_\_

Address 1550 NE 191 ST APT: 109

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

N. MIAMI BEACH, FL 33139

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: EDUARDO J. RODRIGUEZ  
Address: 1550 NE 191 ST APT: 109  
N. MIAMI BEACH, FL 33179

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: EDUARDO J. RODRIGUEZ  
Address: 1550 NE 191 ST APT: 109  
N. MIAMI BEACH, FL 33179

**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 days prior or 90 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*

Ⓟ \_\_\_\_\_ 12/12/2016  
Required Signature/Registered Agent 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.*

Ⓟ \_\_\_\_\_ 12/12/2016  
Required Signature/Incorporator Date