

P17000037297

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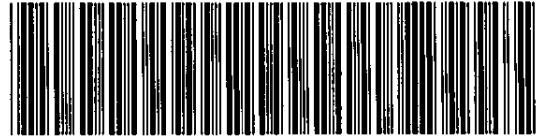
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APR 25 2017

COVER LETTER

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

SUBJECT: _____

ADRIABRAMS, CORP

(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: _____

ADRIANA ABRAMS

Name (Printed or typed)

10818 PINKS BLVD

Address

PRMBROKE PINKS, FL 33025

City, State & Zip

(954) 850-8335

Daytime Telephone number

ADRIANAABRAMS@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

OF:

ADRIABRAMS, CORP.

The Undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I – NAME

The name of the Corporation Shall be:

ADRIABRAMS CORP.

ARTICLE II – PRINCIPAL OFFICE

The principal place of the business and mailing address of this corporation shall be:

10818 Pines Blvd
Pembroke Pines, FL 33025

ARTICLE III – EFFECTIVE DATE

By the incorporator, the effective date is April 17, 2017 or upon approval of the Secretary of The State, of Florida.

ARTICLE IV PURPOSE

The purpose for which the Corporation is formed and organized to engage in activity like Dental hygienists work and Nutritional Consultant or any legal business under the law of the State of Florida.

ARTICLE V – CAPITAL STOCK

V.1 The number of the Shares that this corporation is authorized to have outstanding at any time is:

One Thousand (1000) Shares, per (1) One dollar each.

V.2 All holders of shares of common stocks shall be identical divided with each other in every respect and the holders of the common shares shall be entitle to have unlimited voting

17 APR 18 PM 5:20
FILED
CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
DADE COUNTY, FLORIDA

ARTICLE VI – REGISTER AGENT AND ADDRESS

Adriana D. Abrams
2251 West Preserve Way Ste. 203
Pembroke Pines, FL 33025

ARTICLE VII – INCORPORATORS(S) OFFICER AND DIRECTORS

Adriana D. Abrams **100% Stock Ownership**
2251 W. Preserve Way Ste. 203
Pembroke Pines, FL 33025

Jose M. Valladares
2950 NE 188th Street Ste. 438
Aventura, FL 33180



John

Jose M. Valladares

The shareholders of the Corporation may elect and if elected, shall continue such election to be and S Corporation as provided in Chapter S of the Internal Revenue Code of 1986 as amended, unless the Shareholders of the Corporation unanimously agree otherwise in writing.

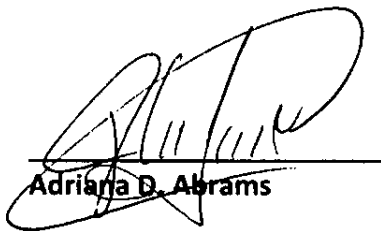
ARTICLE IX – POWER OF CORPORATION

The Corporation shall have the same power as an individual to do all the things necessary to carry out its business and affairs, subjects to limitation or restriction imposed by law or these Articles of incorporation.

ARTICLE X AMENDEDNTS

This Corporation reserves the right to amend, alter, change or repeal any provision contained in these Article of incorporation herein in the manner now or hereafter prescribed by law and By the provisions of any applicable statue of the State of Florida and all rights conferred on stockholders herein are granted subject to this reservation.

In WITNESS WHEREOF, THE UNDERSIGNED HAS HEREUNTO SET HANDS AND SEAL AT MIAMI-DADE County, Florida State this 17th Day of April 2017.


Adriana D. Abrams

17 APR 18 PM 5:21
MIAMI-DADE COUNTY

CERTIFICATE OF DESIGNATION REGISTER AGENT REGISTER OFFICE

Pursuant to the provisions of section 604-501, Florida Statute the undersigned Corporation,
Organized under the laws of the State of Florida, submits the following statement in
designating the register officer/register agent, in the State of Florida.

1. The Name of the Corporation

ADRIABRAMS CORP.

2. The name and address of the Register Agent and office is:

**Adriana D. Abrams
2251 W. Preserve Way Ste. 203
Pembroke Pines, FL 33025**

**I Hereby familiar with and accept the obligation, duties, responsibilities and agree to
act in this capacity as Register Agent.**

SUGNATURE:



DATE:

4/17/17

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