

**Florida Department of State**  
**Division of Corporations**  
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Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**GENY FONTICIELLA P.A**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 03      |
| Estimated Charge      | \$78.75 |

17 MAY 11 PM 4:33

FLORIDA DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
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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: Geny Fonticiella P.A**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address

Mailing address, if different is:

12342 SW 10 LNMIAMI FL 33184**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Real state**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Geny Fonticiella Franquiz (P)Address 12342 SW 10 LN Address: \_\_\_\_\_MIAMI FL 33184

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

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

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

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

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(cont.)

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: Geny Fonticciella Franguiz  
Address: 12342 SW 10 LN  
Miami FL 33184

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Geny Fonticciella Franguiz  
Address: 12342 SW 10 LN  
Miami FL 33184

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

Geny Fonticciella Franguiz  
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.

Geny Fonticciella Franguiz  
Required Signature/Incorporator

Date

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