

# **Electronic Articles of Incorporation For**

**P17000073413  
FILED  
September 01, 2017  
Sec. Of State  
ndmccleessam**

RIVERA FAMILY & ASSOCIATES, INC

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

## **Article I**

The name of the corporation is:

RIVERA FAMILY & ASSOCIATES, INC

## **Article II**

The principal place of business address:

9451 EVERGREEN PLACE  
APT. 305  
DAVIE, FL. 33324

The mailing address of the corporation is:

9451 EVERGREEN PLACE  
APT. 305  
DAVIE, FL. 33324

## **Article III**

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

## **Article IV**

The number of shares the corporation is authorized to issue is:

1

## **Article V**

The name and Florida street address of the registered agent is:

EMMANUEL A RIVERA  
1625 N COMMERCE PARKWAY  
SUITE 207R  
WESTON, FL. 33326

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: EMMANUEL A RIVERA

## **Article VI**

The name and address of the incorporator is:

EMMANUEL A RIVERA  
9451 EVERGREEN PLACE  
APT. 305  
DAVIE, FL 33324

Electronic Signature of Incorporator: EMMANUEL A RIVERA

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

## **Article VII**

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P  
EMMANUEL A RIVERA  
9451 EVERGREEN PLACE APT 305  
DAVIE, FL. 33324

Title: VP  
NICOLE L RIVERA  
9451 EVERGREEN PLACE APT 305  
DAVIE, FL. 33324

## **Article VIII**

The effective date for this corporation shall be:

09/01/2017

09-01-17:03:52PM;From:

To:18502456804

;9546803085

# 1/ 1

# P17000073413

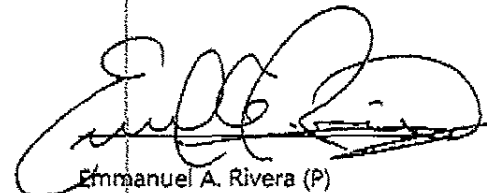
Ref: Document Number: W17000072120

Entity Name: RIVERA FAMILY & ASSOCIATES, INC

Fax: 850-245-6804

Attn: Nadira McClees-Sams

I Emmanuel A. Rivera have no intention of revoking the dissolution, therefore I am releasing the name of the original corporation "RIVERA FAMILY & ASSOCIATES, INC" for use, to another entity.

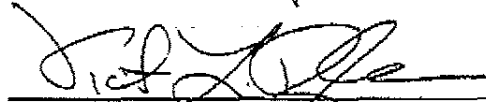
  
Emmanuel A. Rivera (P)

State of: Florida

County of: Broward

Subscribed and sworn to (or affirmed) before me this

1 day of Sept in the year 20 17.



Signature of Notary Public

My Commission Expires:



RECEIVED

17 SEP -1 PM 4:06

DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

N. SAMS

SEP 01 2017

08-31-17;07:04PM;From:

To:18502456804

;9546803085

# 1/ 1

Attn: Jessica

P17000073413

Fax: 850-245-6804

Confirmation Number: 000303226480

As requested, here is a letter stating that I don't want to revoke the dissolution that I had submitted.

RECEIVED

17 AUG 32 AM 9:54

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