PNUW 89381

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COVER LETTER

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

SUBJECT: Armand	o Cardella, P.A.				
30bjec 1	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation an	d a check for:		
■ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	& Certificate of Status		
		ADDITIONAL COPY REQUIRED			
FROM:	nando J. Cardella Nam	e (Printed or typed)	<u></u>		
28 N	West Flagler Street, Suite 922				
	Address				
Mia	mi. FL 33130				
City, State & Zip					
786	-344-3278		•		
	Daytime Telephone number				
card	ellaa@msn.com				
	E-mail address: (to be use	ed 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 corpora	tion shall be:		
ARTICLE II PRINC 28 West Flagler Street	CIPAL OFFICE Principal street address	Mailing add	dress, if different is:
Suite 922			, <u> </u>
Miami, FL 33130			
ARTICLE III PURPO The purpose for which t	OSE he corporation is organized is:	te Business	
		- ·· · · · · · · · · · · · · · · · · ·	1
			17
ARTICLE V INITIA	stock is:		NOV -7 AH 9: 1
Name and Title	Armando J. Cardella	Name and Title: President	3
Address	28 West Flagler Street	Address:	
	Suite 922		
	Miami. FL 33130		
Name and Title:		Name and Title:	<u> </u>
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	

Name and	l'itle:	Name and Title:	
Address		Address:	1
			- ;
			1
ARTICLE VI RE	EGISTERED AGENT		
The name and Flor	ida street address (P.O. Box NOT acceptal	ole) of the registered agent is:	:
Name:	Armando J. Cardella		
•	28 West Flagler Street, Suite 922		
i	Miami, FL 33130		<u>'</u>
ARTICLE VII IN	/CORPORATOR		
The name and add	ress of the Incorporator is:		
Name:	Armando J. Cardella		
Address:	28 W. Flagler Street, Suite 922		
	Miami, FL 33130		
ADTICLE VIII E	FEUCTIVE DATE.		
Effective date if of	FFECTIVE DATE: her than the date of filing:	(OPTIONAL)	
(If an effective dat filing.)	e is listed, the date must be specific and o	annot be more than five days prior or 9	0 days after the
Note: If the date in	serted in this block does not meet the appli	cable statutory filing requirements, this da	te will not be listed as
the document's effe	ctive date on the Department of State's reco	ords.	
Having been name	d . as regi stered agent to accept service of pi	rocess for the above stated corporation at	the place designated in
this certificate. I an	familiar with and accept the appointment	as registered agent and agree to act in this	capacity
		1/	/3/17
	Required Signature/Registered Agen	<u> </u>	Date,
I submit this docum	nent and affirm that the facts stated herein	n are true. I am aware that the false info	rmation submitted in a
document to the De	partment of State constitutes a third degree	felony as provided for in s.817.155, F.S.	/ , 1
	July 1	11,	13/17
Require	d Signature/Incorporator		Date

Armando J. Cardella Armando Cardella, P.A. 28 West Flagler Street, Suite 922 Miami, FL 33130

November 3, 2017

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

Dear Department of State:

Per my conversation with your representative, enclosed, please find application and check for \$70.00 to open a new corporation named Armando Cardella, P.A. as I don't wish to reinstate the prior corporation with the same name, which had a Document number of P12000009885.

Sincerely,

Armando J. Cardella

Armando Cardella, P.A.

President