P18000036223

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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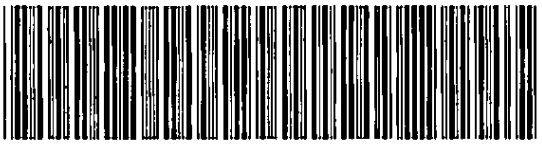

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18 MAR 26 AM 7:33

D O'KEEFE

APR 23 2018

W18-24371

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 13, 2018

MARIA ELISA GIROUD
2818 FILLMORE ST. APARTMENT A
HOLLYWOOD, FL 33020

SUBJECT: MARIA ELISA GIROUD P.A.
Ref. Number: W18000024371

We have received your document for MARIA ELISA GIROUD P.A. and your check(s) totaling $70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE
Regulatory Specialist II

Letter Number: 918A00005087

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DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

FILED
18 MAR 26 AM 7:37
TALLAHASSEE, FLORIDA

www.sunbiz.org

COVER LETTER

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

SUBJECT: MARIA ELISA GIROUD P.A
(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: MARIA ELISA GIROUD
Name (Printed or typed)

2818 FILLMORE ST. APARTMENT A
Address

HOLLYWOOD, FLORIDA, 33020
City, State & Zip

786-443-3006
Daytime Telephone number

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

ARTICLE I NAME
The name of the corporation shall be: MARIA ELISA GIROUD P.A

ARTICLE II PRINCIPAL OFFICE

Principal street address

2818 Fillmore St.Apartment A,Hollywood,Fl33020

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Buying, selling, renting,management, advice,to contract,
and general labor in regards real estate on any kind of property.

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10 MAR 26 AM 7:37
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Maria Elisa Giroud/President.
Address 2818 Fillmore Street, Apartment A
Hollywood,FL33020

Name and Title:
Address:

Name and Title:
Address

Name and Title:
Address:

Name and Title:
Address

Name and Title:
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: Maria Elisa Giraud

Address: 2818 Fillmore Street, Apat A

Hollywood,FL,33020

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is

Name: Maria Elisa Giraud

Address: 2818 Fillmore Street Apt A

Hollywood, Fl. 33020

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18 MAR 26 AM 7:3

TALLAHASSEE, FLORIDA

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.

Maria E Giraud 03/02/2018

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.

Maria E Giraud 03/02/2018

Required Signature Incorporator Date