## P180000 68930

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

N. SAMS AUG 1 4 2018



600315588896

07/12/18--01804--010 \*\*70.99

mala Assultificalis

18 AUS -8 PH 12: 19

July 16, 2018

ALEJANDRO CANTERO 6800 WHITE OAK DR MIAMI LAKES, FL 33014 US

SUBJECT: ALEJANDRO CANTERO, PA

Ref. Number: W18000064675

We have received your document for ALEJANDRO CANTERO, PA and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific business purpose of the professional association must be stated in the document.

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.

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 818A00014516



## **COVER LETTER**

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

SUBJECT: ALEJ	ANDRO CANTERO, PA		
	(PROPOSED CORPOR)	VIE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an or	iginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
■ \$70.00 Filing Fee		□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM: _	LEJANDRO CANTERO Nam	e (Printed or typed)	
		Address	
М	IAMI LAKES, FL 33014		
_	City	State & Zip	
30	056064026		
	Daytime 1	elephone number	<del></del>
AI	.EX20037@GMAIL.COM		
	E-mail address: (to be use	d for future annual report i	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)

<u>LE II — PRIN</u> O	<u>CIPAL OFFICE</u> Principal <u>street</u> address	Mai	ling address, if different is:
THITE OAK DE		<del> </del>	
MI LAKES, FL 3.	3014	<del></del>	
irpose for which irpose for the Florical irpose for increase in the irreduced in the irredu	ful real estate laws of the Uni		and trantion as passed the
ICLE IV SHAR number of shares of ICLE V INITE Name and Titl	Stock is: MANUAL DIRECTORS  ALEJANDRO CANTERO	Name and Title:	18 AUG -8 P
number of shares of <u>ICLE_VINITL</u>	AL OFFICERS AND/OR DIRECTORS	Name and Title:Address:	AUG -
number of shares of ICLE V INITE  Name and Tal  Address	Stock is: TOWN  AL OFFICERS AND/OR DIRECTORS  ALEJANDRO CANTERO  6800 WHITE OAK DR	Address:  Name and Title:  Address:	MUG -8 PH 12: 19

Name a	nd Title:	Name and Title:
Addres	ss	Address:
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:
Name:	ALEJANDRO CANTERO	
Address:	MIAMI LAKES, FL 33014	18
	6800 White Oak Or	AUG -
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>	3-8 PK 12: 19
The <u>name and a</u>	uddress of the Incorporator is:	PK 12: 19
Name:	ALEJANDRO CANTERO	
Address:	6800 WHITE OAK DR	<u> </u>
	MIAMI LAKES, FL 33014	
Effective date, i	EFFECTIVE DATE:  f other than the date of filing:  date is listed, the date must be specific and ca	(OPTIONAL) nnot be more than five days prior or 90 days after
	e inserted in this block does not meet the applica effective date on the Department of State's recor	able statutory filing requirements, this date will not be ds.
	med as registered agent to accept service of pro	cess for the above stated corporation at the place desi registered agent and agree to act in this capacity
Having been na this certificate, [	am familiar with and accept the appointment as	•
Having been na this certificate, J	James 1	07/09/2018
this certificate, [	Required Signature/Registered Agent	Date
this certificate, l	Required Signature/Registered Agent	Date are true. I am aware that the false information subn

.