3052201440

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document,

(((H18000252437 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:						
	Division of Corporations					
	Fax Number	: (850)617-6381				
From:						
	Account Name	: LAZARUS CORPORATE FILING SERVICE. INC.	37.4			
	Account Number		1230	හෙ		
	Phone	: (305)552-5973		7		
	Fax Number	: (305)675-5944	110	8		
		•		N		
			:	ဌာ		
**Ent	er the email addr	ess for this business entity to be used for futu	ırë '			
	annual report max	llings. Enter only one email address please.**		<u> </u>		
	Email Address:		ප	Ċ		

FLORIDA PROFIT/NON PROFIT CORPORATION ORLANDO J. ABELLA, P.A.

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

Electronic Filing Menu

Corporate Filing Menu

3052201440

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE 1 NAME The name of the corporation shall be:	Ndo J. AbELLA
ARTICLE II PRINCIPAL OFFICE	
Principal street address	Mailing address, if different is:
GO AhagON AVEN	•
CORAL GabLES	
1—	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	·
Real Esta	* =
- 2519	LE
	·
2	Dr
ARTICLE IV SHARES The number of shares of stock is: 100 SHA	gres 8
This munice of states of states is.	7700 3
ARTICLE V INITIAL OFFICERS AND/OR DIRECT	TORS (O)
Name and Title: ORLando J-A	DE Name and Title:
1 - 0000	
CORAL GABIE	7
FL 33134	<u> </u>
7 · · · · · · · · · · · · · · · · · · ·	
Name and Title:	Name and Title:
Address	Address:
사람 	
der la company de la company d	
Name and Title:	Name and Title:
Name and Title:	
	· <u></u>

			(conti.)
Name and Title:	Name and	! Title:	
Address	Address:		
ARTICLE VI REG	ISTERED AGENT	Per	4
The name and Florida s	reet address (P.O. Box NOT acceptable) of the register	ed agent is:	eo >>
Name: O/	CLANDO J. ABEILA	r: -	SS [*] L
Address: 6	O ARAGON AVENUE		8
· C	ORAL GABIES FL 33	3134	A 1
		**	င္ဟာ 🛴
ARTICLE VII INCO	RPORATOR	·	()
The pame and address o			
Name:	RLANDO J. ABELL	.A	
	GO ARAGON AVEN		
(SORAL GABIES FL	33/34	
	3.13.03		
Having been named as i	egistered agent to accept service of process for the abo	ve stated corporation at the place d	esignated in
inis certificate,), am fam	liar with and accept the appointment as registered agen	it and agree to act in this capacity	
- P -		_	
	Required Signature/Registered Agent	Date	
I submit this document i	and affirm that the facts stated herein are true. I am a	tware that the false information su	bmitted in a
aocument to the Departn	ent of State constitutes a third degree felony as provide	d for in 3.817.155, F.S.	
0 -			

Required Signature/Incorporator

Date