

P18000074045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

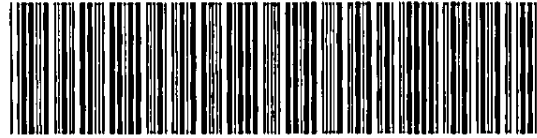
Special Instructions to Filing Officer:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 1, 2018

ROARK RODRIGUEZ
86700 OVERSEAS HWY #2
ISLAMORADA, FL 33036

SUBJECT: ISLAMORADA RESORTWEAR COMPANY
Ref. Number: W18000069780

We have received your document for ISLAMORADA RESORTWEAR COMPANY and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

List complete name of manager and list title of L.A. RODRIGUEZ.,

Please return the corrected original and one copy of 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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 918A00015782

August 13, 2018

Florida Department of State

New Filing Section

Mr. Tyrone Scott

Regulatory Specialist

Re; 918A00015782

Dear Sir;

Apologies for the mix up, a corrected copy is enclosed and attached.

Thank you,

Sincerely,

A handwritten signature in cursive script, appearing to read "Roark", is written over a solid horizontal line.

Roark Rodriguez

COVER LETTER

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

SUBJECT: ISLAMORADA RESORTWEAR COMPANY
(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: ROARK RODRIGUEZ

Name (Printed or typed)

86700 OVERSEAS HWY #2

Address

ISLAMORADA, FL 3036

City, State & Zip

05-853-0001

Daytime Telephone number

larcuda@gmail.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 ISLAMORADA RESORTWEAR COMPANY INC.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

86700 Overseas Highway

Islamorada, Florida 33036

P O BOX 223

Islamorada, FL 33036

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: RETAIL STORE (SOFT GOODS-GIFT) MINOR WHOLESALE

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ROARK RODRIGUEZ DIRECTOR

Name and Title: _____

Address: 86700 OVERSEAS HWY

Address: _____

ISLAMORADA, FL 3036

Name and Title: LAZARO A RODRIGUEZ MANAGER

Name and Title: _____

Address: 75424 OVERSEAS HWY -2ND)

Address: _____

ISLAMORADA, FL 33036

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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TALLAHASSEE, FL 32310
SECRETARY OF STATE

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: LAZARO RODRIGUEZ

Address: 86700 OVERSEAS HIGHWAY #2A

ISLAMORADA, FL 33036

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DANIEL KEIL ESQ

Address: 6500 Cowpen Road

Miami, Lakes, FL 333014

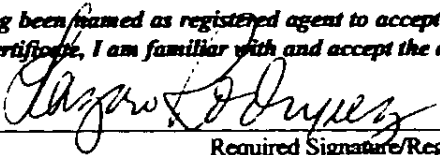
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 08-01-2018 (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

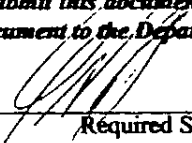


Required Signature/Registered Agent

7-26-18

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.



Required Signature/Incorporator

7/27/18

Date