P180000 17864

(Requestor's Name)
(Negassial & 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 SEP 17 2018



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To whom it may concern,

I am writing to confirm I will not reinstate Document # P16000018194 Shana Bonilla PA.

When I called I was told to write this letter and I would be able to file a new one with my same name since it has only been dissolved for under a year. I have also submitted in this package the paperwork for a new filing for Shana Bonilla PA. Please call or email me with any question. Thank you for your help.

Shana Bonilla

754-246-4288

realty@shanabonilla.com

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COVER LETTER

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

Shana SUBJECT:	Bonilla PA		
SUBJECT:	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d 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 o Status
		ADDITIONAL CO	
FROM:	ana Bonilla Nam	e (Printed or typed)	
270	Nam 00 N 34th Ave. Unit H	e (Printed or typed)	
		Address	
Hol	lywood, FL. 33021		·
	City	, State & Zip	
754	-246-4288		
	Daytime 7	Telephone number	
real	ty@shanabonilla.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)

ie name of the corpora	adon shan oc.		
RTICLE II PRIN	CIPAL OFFICE Principal street address	Mailing a	address, if different is:
700 N 34th Ave. Un	nit H		
ollywood, FL. 3302	1		
RTICLE III PURP he purpose for which	the corporation is organized is:	ate	
			
RTICLE IV SHAK	RES 100		
ne number of shares o	f stock is: AL OFFICERS AND/OR DIRECTORS Shana Bonilla President	Name and Title:	
he number of shares o	f stock is: AL OFFICERS AND/OR DIRECTORS Shana Bonilla President 2700 N 34th Ave	Name and Title: Address:	SEP 14 0
ne number of shares o RTICLE V INITE Name and Title	f stock is: AL OFFICERS AND/OR DIRECTORS Shana Bonilla President		SEP 14 PA 12: 3
ne number of shares o RTICLE V INITE Name and Titl Address	f stock is: AL OFFICERS AND/OR DIRECTORS Shana Bonilla President 2700 N 34th Ave Unit H	Address:	SEP 14 PH 12: 32
Name and Titl Address	AL OFFICERS AND/OR DIRECTORS Shana Bonilla President 2700 N 34th Ave Unit H Hollywood, FL. 33021	Address:	SEP 14 PH IZ: 32
RTICLE V INITE Name and Tite Address Name and Title	f stock is: AL OFFICERS AND/OR DIRECTORS Shana Bonilla President 2700 N 34th Ave Unit H Hollywood, FL. 33021	Address: Name and Title: Address:	SEP 14 PM 12: 32
RTICLE V INITE Name and Titl Address Name and Title Address	AL OFFICERS AND/OR DIRECTORS Shana Bonilla President 2700 N 34th Ave Unit H Hollywood, FL. 33021	Address: Name and Title: Address:	SEP 14 PM 12: 32

Name a	and Title:	Name and Title:	
Addre	ess	Address:	
<u>ARTICLE VI</u>	REGISTERED AGENT		
The <u>name and</u>	Florida street address (P.O. Box NOT accepta Shana Bonilla	able) of the registered agent is:	
Name:			
Address:	2700 N 34th Ave. Unit H		18
	Hollywood, FL. 33021		SEP
			P -
<u>ARTICLE VII</u>	INCORPORATOR		
The <u>name and</u>	address of the Incorporator is:		PM 12: 32
Name:	Shora boulle	ą.	412: 32 Fi bana
Address:	2700 N 34th AVE	o init H	F
rida cos.	Hlud, FL. 3300	1	
Effective date,	I EFFECTIVE DATE: if other than the date of filing: 09/10/ date is listed, the date must be specific and	2018 . (OPTIONA cannot be more than five days	•
Note: If the dathe document's	ate inserted in this block does not meet the appl a effective date on the Department of State's rec	icable statutory filing requirements	nts, this date will not be listed as
Having been n this certificate	amed as registered agent to accept service of p I am familiar with and accept the appointment	process for the above stated corp t as registered agent and agree to	oration at the place designated in act in this capacity
\sim	M. I. The second		08/27/2018
	Required Signature/Registered Ager	nt	Date
I submit this d	ocument and affirm that the facts stated herei Department of State constitutes a third degree	in are true. I am aware that the e felony as provided for in s 817	t false information submitted in a
	X	e jesony us provided joi in 5.017.	-1 1 1 1
Pan	nuired Signature/Incorporator		812712018
RCU	lanca organica ameniporator		Date