DIACCCOU2717

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

Office Use Only



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COVER LETTER

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

SUBJECT:			
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
inclosed are an oriș	ginal and one (1) copy of the art	ticles of incorporation and	d a check for:
■ \$70.00 Filing Fee	\$78.75 Filing Fee	□ \$78.75 Filing Fee	□ \$87.50 Filing Fee,
g . ee	& Certificate of Status	& Certified Copy	
		ADDITIONAL CO	i i
FROM:	RANCISCO J. AGUERO		
	Nam	e (Printed or typed)	
150	07 SUNSET DR.		
		Address	
r.	N		
CO	ORAL GABLES, FL 33143		<u> </u>
		, State & Zip	
		, State & Zip	A) LAHAS
	City, 5-444-8228	, State & Zip	ALLAHASSEL
305	City. 5-444-8228 Daytime 1 @rospartners.com	•	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)

e purpose for which the corporation is organized is:	Mailing address, if diffe	
TICLE III PURPOSE e purpose for which the corporation is organized is: ANY AND AL	L LAWFUL PURPOSE.	
purpose for which the corporation is organized is:	L LAWFUL PURPOSE.	
RTICLE III PURPOSE to purpose for which the corporation is organized is: ANY AND ALL ANY AND ALL ANY AND ALL ANY AND ALL BY ANY AND ALL ANY AND ALL ANY AND ALL ANY AND ALL BY ANY AND ALL ANY AND ALL BY ANY AND A	L LAWFUL PURPOSE.	
RTICLE IV SHARES 100		
TICLE IV SHARES 100		
TICLE IV SHARES		
TICLE IV SHARES 100		
RTICLE IV SHARES 100		
Name and Title: FRANCISCO J. AGUERO, PSD 5:507 SUNSET DRIVE		2019 1
Address /	Address:	
CORAL GABLES, FL 33143		
Name and Titles		en En
Name and Title:	Name and True:	
Address /	Address:	
Name and Title:N	Vame and Title:	·· .
	Address:	

Name a	and Title:	Name and Title:		
Addre	ss	Address:		
	REGISTERED AGENT			
The name and	Florida street address (P.O. Box NOT accepta	ble) of the registered agent is:		
Name:	FRANCISCO J. AGUERO			
Address:	1507 SUNSET DRIVE			
	CORAL GABLES, FL 33143			
<u>ARTICLE VII</u>	INCORPORATOR		2019	
The name and	address of the Incorporator is:		<u> </u>	
Name:	FRANCISCO J. AGUERO			
Address:	1507 SUNSET DRIVE		ZIII JAN I I LA IU:	
	CORAL GABLES, FL 33143			
Effective date,	if other than the date of filing: 1/7/2019 date is listed, the date must be specific and o	. (OPTION cannot be more than five da		
	te inserted in this block does not meet the appli effective date on the Department of State's rec		nents, this date will not be listed as	
	amed as registered agent to accept service of p I am familiar with and accept the appointment			
KA	4-1-		1/10/2019	
	Required Signature/Registered Agen	ut	Date	
	ocument and affirm that the facts stated hereice Department of State constitutes a third degree			
AL	440		1/10/2019	
Req	urred/Signature/Incorporator		Date	

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