## P19000033062

| (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: |   |
|   |   |
|   |   |
| W19-13759                               |   |

Office Use Only

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## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

February 12, 2019

MARIA JIMENA CORRAL 11401 NW 89 STREET UNIT 101 DORAL, FL 33178

SUBJECT: MARIA JIMENA CORRAL, P.A.

Ref. Number: W19000013759

We have received your document for MARIA JIMENA CORRAL, P.A. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Keyna E Page Regulatory Specialist II

Letter Number: 719A00002992

www.sunbiz.org

## **COVER LETTER**

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

| SUBJECT:             | JIMENA CORRAL, P.A.                          |                                     |                           |
|----------------------|--|-------------------------------------|---------------------------|
|                      | (PROPOSED CORPORA                            | TE NAME – MUST INCL                 | UDE SUFFIX)               |
| Enclosed are an orig | inal 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 | & Certificate o<br>Status |
|                      |  | ADDITIONAL CO                       | OPY REQUIRED              |
| FROM:                |  | e (Printed or typed)                |                           |
| <del></del>          | 101 NW 89 STREET UNIT 101                    | Address                             | ###                       |
| DC                   | PRAL, FL 33178                               |                                     |                           |
|                      | City   | , State & Zip                       |                           |
| 786                  | 5 478 9060<br>                               |                                     |                           |
|                      |  | Telephone number                    |                           |
| jim                  | enacorral@hotmail.com                        |                                     |                           |
| <del></del>          | E-mail address: (to be use                   | d 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)

| 2C(F)) 891   | NYIDAL OFFICE   |   |  |
|--|---|---|--|
|  | NCIPAL OFFICE Principal street address ET UNIT 101  | Mailing a   | ddr <del>ess</del> , if diff <del>ere</del> nt is: |
| RAL, FL 33178  |   |   |  |
|  |   |   |  |
| CLEIII PUR   | POSE REALTO   | DR .  |  |
|  |   |   |  |
| <del></del>  |   |   | <u> </u>   |
|  |   |   |  |
|  |   |   |  |
| CLE IV SHAI<br>imber of shares o   | RES 100<br>of stock is:   |   |  |
| CLE IV SHALE  Shares of Sh | RES 100  of stock is:  IAL OFFICERS AND/OR DIRECTORS  MARIA JIMENA CORRAL-PRESID  tie:  |   |  |
| CLE IV SHALE  Shares of Shares of CLE V INITIA   | RES  100  of stock is:  ALL OFFICERS AND FOR DIRECTORS  WARIA JIMENA CORRAL-PRESID  11401 NW 89 STREET UNIT 101                 | ENT Name and Title:   |  |
| CLE IV SHALE  SH | RES 100 of stock is:  DAL OFFICERS AND/OR DIRECTORS MARIA JIMENA CORRAL-PRESID tie:   | ENT Name and Title:   |  |
| CLE IV SHAP<br>miner of shares of<br>CLE V INITA<br>Name and Tit<br>Address  | RES 100 Di stock is:  MAL OFFICERS AND/OR DIRECTORS  MARIA JIMENA CORRAL-PRESID  11401 NW 89 STREET UNIT 101  DORAL, FL 33178   | Name and Title: Address:  |  |
| CLE IV SHAP<br>amber of shares of<br>CLE V INITA<br>Name and Tit<br>Address  | RES 100 of stock is:  MAL OFFICERS AND/OR DIRECTORS  MARIA JIMENA CORRAL-PRESID  11401 NW 89 STREET UNIT 101  DORAL, FL 33178   | Name and Title:Address:   | 19 MAR I   |
| CLE IV SHALE  STATE SHALE  SHA | RES 100 Di stock is:  MAL OFFICERS AND/OR DIRECTORS  MARIA JIMENA CORRAL-PRESID  11401 NW 89 STREET UNIT 101  DORAL, FL 33178   | Name and Title:Address:   | 19 MAR 18  |
| CLE V SHAL  STATE OF SHARES OF CLE V INIT  Name and Tit  Address  Name and Titl  | RES 100 of stock is:  MAL OFFICERS AND/OR DIRECTORS  MARIA JIMENA CORRAL-PRESID  11401 NW 89 STREET UNIT 101  DORAL, FL 33178   | Name and Title:Address:   | 19 MAR 18 AM ():                                   |
| CLE V SHAL  STATE OF SHARES OF CLE V INIT  Name and Tit  Address  Name and Titl  | RES 100 of stock is:  MAL OFFICERS AND/OR DIRECTORS  MARIA JIMENA CORRAL-PRESID  11401 NW 89 STREET UNIT 101  DORAL, FL 33178   | Name and Title:Address:   | 19 MAR 18 AM                                       |
| CLE IV SHALE Imber of shares of CLE V INIT  Name and Tit  Address  Name and Titl  Address  | RES 100 of stock is:  MAL OFFICERS AND/OR DIRECTORS  MARIA JIMENA CORRAL-PRESID  11401 NW 89 STREET UNIT 101  DORAL, FL 33178   | Name and Title:  Address:  Name and Title:  Address:                  | 19 MAR 18 AM (1: 3)                                |
| CLE IV SHALE Imber of shares of CLE V INIT  Name and Tit  Address  Name and Titl  Address  | RES Dif stock is:  MAL OFFICERS AND AOR DIRECTORS  MARIA JIMENA CORRAL-PRESID  11401 NW 89 STREET UNIT 101  DORAL, FL 33178  e: | Name and Title:  Address:  Name and Title:  Address:  Name and Title: | 19 MAR 18 AM (1: 3)                                |

| Addre  |   |   |   |
|--|---|---|---|
|  |   | Address:  |   |
|  |   |   |   |
|  |   | _   | 19  |
| TICLE 17   | REGISTERED AGENT  |   | MAR TAR   |
| nuc:   | Torida street address (P.O. Box NOT acceptable) of MARIA JIMIENA CORRAL   | the registered agent is:  | R 18 A  |
| idress:  | 11401 NW 89 STREET UNIT 101   |   | <u></u>   |
|  | DORAL, FL 33178   |   | 0.000 T. 1000 |
| TICLEVII   | INCORPORATOR  |   | 1   |
| name and :   | ddress of the Incorporator is:  |   |   |
| Name:  | MARIA JIMENA CORRAL   |   |   |
| Address:   | 11401 NW 89 STREET UNIT 101   |   |   |
|  | DORAL, FL 33178   |   |   |
| TICLE LTA  | EFFECTIVE DATE:   |   |   |
| ective dute, i<br>an effective   | f other than the date of filing:  11/16/2018  date is listed, the date must be specific and cannot  | . (OPTION<br>be more than five day  | AL)<br>ys prior or 90 days after the  |
| ective date, i an effective ng.)  te: If the dat   | f other than the date of filing:  | be more than five day   | ys prior or 90 days after the   |
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| an effective ng.)  te: If the date document's  | f other than the date of filing:  date is listed, the date must be specific and cannot  e inserted in this block does not meet the applicable st effective date on the Department of State's records.  med as registered agent to accept service of process f am familiar with and accept the appointment as regis                                      | atutory filing requirem   | ys prior or 90 days after the<br>nents, this date will not be listed as   |
| ective date, i an effective ag.)  te: If the dat document's  ving been no certificate, i   | f other than the date of filing:  date is listed, the date must be specific and cannot  e inserted in this block does not meet the applicable st effective date on the Department of State's records.  med as registered agent to accept service of process f am familiar with and accept the appointment as regis  Required Signature/Registered Agent | be more than five day attitiony filing requirem for the above stated contered agent and agree | nents, this date will not be listed as reporation at the place designated in to act in this capacity:  11/16/2018 Date  |
| an effective ng.)  te: If the dat document's  ving been na recrificate, i  | other than the date of filing:  date is listed, the date must be specific and cannot  e inserted in this block does not meet the applicable st effective date on the Department of State's records.  med as registered agent to accept service of process f am familiar with and accept the appointment as regis  Required Signature/Registered Agent   | atutory filing requirem<br>for the above stated con   | pents, this date will not be listed as reportation at the place designated in to act in this capacity.  11/16/2018 Date   |
| an effective ng.)  te: If the dat document's eving been no secretificate, it is done this document t | f other than the date of filing:  date is listed, the date must be specific and cannot  e inserted in this block does not meet the applicable st effective date on the Department of State's records.  med as registered agent to accept service of process f am familiar with and accept the appointment as regis  Required Signature/Registered Agent | atutory filing requirem<br>for the above stated con   | pents, this date will not be listed as reportation at the place designated in to act in this capacity.  11/16/2018 Date   |

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