

3/29/2019

Division of Corporations

Florida Department of State
Division of Corporations
Section of Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION
OVIDIO J. MIJARES, P.A.

Certificate of Status	0
Certified Copy	1
Page Count	03
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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: OVIDIO J. MUARES, P.A.**ARTICLE II PRINCIPAL OFFICE**Principal street address
14331 SW 120 STREET STE: 201
MIAMI, FL 33186Mailing address, if different is:
14331 SW 120 STREET STE: 201
MIAMI, FL 33186**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: PRACTICE AS REAL ESTATE SALES ASSOCIATE**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: OVIDIO J. MUARES (P/S/T)Address 14331 SW 120 STREET STE: 201
MIAMI, FL 33186

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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: OVIDIO J. MIJARES
Address: 14331 SW 120 STREET STE: 201
MIAMI, FL 33186

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: OVIDIO J. MIJARES
Address: 14331 SW 120 STREET STE: 201
MIAMI, FL 33186

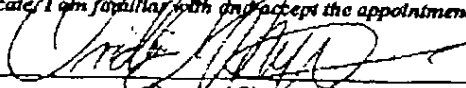
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

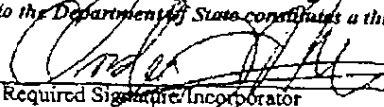
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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 as the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

 03-28-2019
Required Signature/Registered Agent 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.

 03-28-2019
Required Signature/Incorporator Date