

# P19000036803

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**FLORIDA PROFIT/NON PROFIT CORPORATION  
SURYDANNAY DUQUE, P.A.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME** SURYDANNAY DUQUE, P. A.

The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is: \_\_\_\_\_

23065 DELHI AVENUE \_\_\_\_\_

PORT CHARLOTTE, FL. 33952 \_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LEGAL PURPOSES \_\_\_\_\_

**ARTICLE IV SHARES**

The number of shares of stock is: 100 \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: SURYDANNAY DUQUE, PTSD

Name and Title: \_\_\_\_\_

Address: 23065 DELHI AVENUE

Address: \_\_\_\_\_

PORT CHARLOTTE, FL 33952 \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: SURYDANNAY DUQUE  
 Address: 23065 DELHI AVENUE  
PORT CHARLOTTE, FL. 33952

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: SURYDANNAY DUQUE  
 Address: 23065 DELHI AVENUE  
PORT CHARLOTTE, FL. 33952

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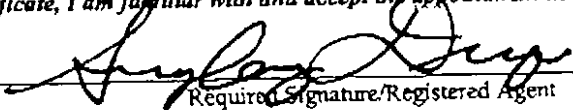
**ARTICLE VIII EFFECTIVE DATE:**

MAY 3, 2019 (OPTIONAL)  
 Effective date, if other than the date of filing: \_\_\_\_\_

(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.)

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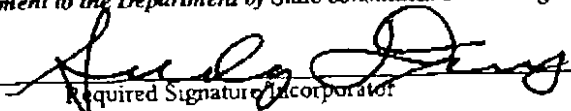
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
 Required Signature/Registered Agent

MAY 3, 2019

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

MAY 3, 2019

Date