

PI9000041899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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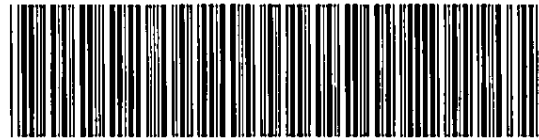
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/11/19--01025--002 **78.75

COVER LETTER

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

SUBJECT: URBITA GLASS MIRROR CORP
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and 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 of
Status

ADDITIONAL COPY REQUIRED

FROM: CRUZ RODRIGUEZ
Name (Printed or typed)

9615 SW 24TH STREET (A-218)
Address

MIAMI, FLORIDA 33165
City, State & Zip

786-930-2037
Daytime Telephone number

rodriguezcruz162@gmail.com
E-mail address: (to be used 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)

ARTICLE I NAME URBITA GLASS MIRROR, CORP
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address

9615 SW 24TH STREET (A-218)

MIAMI, FLORIDA, 33165

Mailing address, if different is:

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CRUZ RODRIGUEZ, PRESIDENT

Name and Title: _____

Address 9615 SW 24TH STREET (A-218)

Address: _____

MIAMI, FLORIDA 33165

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

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: CRUZ RODRIGUEZ
Address: 9615 SW 24TH STREET (A-218)
MIAMI, FLORIDA 33165

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CRUZ RODRIGUEZ
Address: 9615 S.W. 24th Street (A218)
MIAMI, FLORIDA 33165

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 04/05/2019. (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 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

21-5-2019
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

21-5-2019
Date