

P19000052121

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

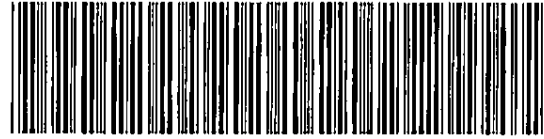
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700331536057

700331536057
07/02/19--01033--005 **70.00

C RICO
JUL 01 2019

19 JUL -2 PM 12:00
RECEIVED
STATE OF FLORIDA

FILED
2019 JUL -2 PM 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Ideas Creativas Popotos 1520 C.A., 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: Alex Pina co.

Name (Printed or typed)

8400 NW 36th St Ste 450

Address

Doral, FL 33166

City, State & Zip

1.844.941.1120

Daytime Telephone number

client@alexpina.co

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

Ideas Creativas Popotos 1520 C.A., Corp
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address
1551 SW 116th Ave Bldg 148

Pembroke Pines, FL 33025

Mailing address, if different is:

ARTICLE III PURPOSE

ANY AND ALL LAWFUL BUSINESS
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

10,000
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Mariam D Macea Ramirez - President

Name and Title: _____

Address 1551 SW 116th Ave Bldg 148

Pembroke Pines, FL 33025

Address: _____

Name and Title: Shineed O Lindarte Macea - Vice President

Name and Title: _____

Address 1551 SW 116th Ave Bldg 148

Pembroke Pines, FL 33025

Address: _____

Name and Title: Juan P Navas Trivino - Vice President

Name and Title: _____

Address 1551 SW 116th Ave Bldg 148

Address: _____

FILED
2019 JUL -2 PM 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Alex Pina co. _____

Address: 8400 NW 36th St Ste 450 _____

Doral, FL 33166 _____

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Mariam Desiree Macea Ramirez _____

Address: 1551 SW 116th Ave Bldg 148 _____

Pembroke Pines, FL 33025 _____

FILED
2013 JUL -2 PM 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

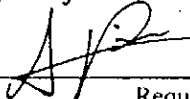
ARTICLE VIII EFFECTIVE DATE:

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 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

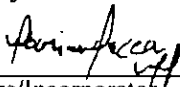


Required Signature/Registered Agent

07/01/2019

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

07/01/2019

Date