P1900059934

(Re	questor's Name)			
(Address)				
(Ad	dress)	_		
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	MAIT WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only

PUS 0 5 2013



700331972897

07/22/19--01019--004 ++70.00

2019 JUL 22 AH 9: 03

COVER LETTER

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

λír

SUBJECT: BIG MA	AN SPOT INC		
	(PROPOSED CORPORA	ATE NAME - MUST INCL.	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	d a check for:
	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	
		ADDITIONAL CO	Status
STI FROM:	EPHANIE MARTINEZ		
	Name	e (Printed or typed)	
8186	0 NW 36 ST SUITE 406		
		Address	
DO	RAL FL 33166		
	City,	State & Zip	
305	-406-3800		
	Daytime 1	Telephone number	
ATF	PLUS@LIVE.COM		
	E-mail address: (to be use	d for future annual report i	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)

RTICLE II PRIN	<u>CIPAL OFFICE</u> Principal <u>street</u> address	Mailing a	ddress, if different is:	
<u> </u>		——————————————————————————————————————		
57 NW 3RD AVE		-	, <u>, , , , , , , , , , , , , , , , , , </u>	
IAMI FL 33186		-		
RTICLE III PURF e purpose for which	the corporation is organized is:	Y AND ALL LAWFUL BUSINESS	S	
•			7.2	
		/-111 -	2019	
		·•	2 <u>a</u>	
RTICLE IV SHAI e number of shares o	RES 100 f stock is:		9: - F8 9: - F8	
e number of shares o	f stock is:	<u>ORS</u>	- AN 9: 03	
e number of shares o	f stock is: AL OFFICERS AND/OR DIRECTO le: 12784 SW 134TH ST	<u>ORS</u>	- AN 9: 03	
e number of shares of shares of shares of shares of share and Tit	f stock is: AL OFFICERS AND/OR DIRECTO le: 12784 SW 134TH ST	ORS Name and Title:	- AN 9: 03	
e number of shares of shares of shares of shares of share and Tit	f stock is: AL OFFICERS AND/OR DIRECTO le: ANAMARIA GUZMAN P 12784 SW 134TH ST	ORS Name and Title:	- AN 9: 03	
e number of shares of RTICLE V INITA Name and Tit Address	f stock is: AL OFFICERS AND/OR DIRECTO de: ANAMARIA GUZMAN P 12784 SW 134TH ST MIAMI FL 33186	Name and Title: Address:	2 AX 9: 03	
e number of shares of RTICLE V INITA Name and Tit Address Name and Tit	f stock is: AL OFFICERS AND/OR DIRECTO le: ANAMARIA GUZMAN P 12784 SW 134TH ST MIAMI FL 33186	Name and Title: Address: Name and Title:	2 AX 9: 03	
e number of shares of RTICLE V INITA Name and Tit Address	f stock is: AL OFFICERS AND/OR DIRECTO de: ANAMARIA GUZMAN P 12784 SW 134TH ST MIAMI FL 33186	Name and Title: Address: Name and Title:	2 AX 9: 03	
e number of shares of RTICLE V INITA Name and Tit Address Name and Tit	f stock is: AL OFFICERS AND/OR DIRECTO le: ANAMARIA GUZMAN P 12784 SW 134TH ST MIAMI FL 33186	Name and Title: Address: Name and Title:	2 AX 9: 03	
e number of shares of RTICLE V INITA Name and Tit Address Name and Tit	f stock is: AL OFFICERS AND/OR DIRECTO le: ANAMARIA GUZMAN P 12784 SW 134TH ST MIAMI FL 33186	Name and Title: Address: Name and Title:	2 AX 9: 03	
e number of shares of RTICLE V INITA Name and Tit Address Name and Titl Address	f stock is: AL OFFICERS AND/OR DIRECTO le: ANAMARIA GUZMAN P 12784 SW 134TH ST MIAMI FL 33186	Name and Title: Address: Name and Title: Address:	7 A 9: 03	

Name a	and Title:	Name and Title:	
Addres	ss	Address:	
ADTICI E VI	REGISTERED AGENT		
	Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	ANAMARIA GUZMAN		
Address:	12784 SW 134TH ST		
	MIAMI FL 33186		
ARTICI E VII	INCORPORATOR		
	address of the Incorporator is:		
Name:	ANAMARIA GUZMAN		
Address:	12784 SW 134TH ST		
	MIAMI FL 33186		
ARTICI F VIII	EFFECTIVE DATE:		
Effective date, i	if other than the date of filing: date is listed, the date must be specific and car	. (OPTIONAL nnot be more than five days p) rior or 90 days after the
Note: If the date the document's	te inserted in this block does not meet the applica effective date on the Department of State's record	ble statutory filing requirement ds.	s, this date will not be listed as
Having been no this certificate,	amed as registered agent to accept service of proc I am familiar with and accept the appointment as	cess for the above stated corpor registered agent and agree to a	ration at the place designated in act in this capacity
dramo	ua Juzman Required Signature/Registered Agent		7/15/2019 Date
I submit this do	ocument and affirm that the facts stated herein of Department of State constitutes a third degree fe	are true. I am aware that the f	Talse information submitted in a 55. F.S.
Inamo	wied Symptom Uncorporator		7/15/2019
			Dall

AFFIDAVIT

BEFORE ME, the undersigned authority, on this day personally appeared **BIG MAN SPOT INC**, who after being firstly duly sworn, under oath, deposes and says:

- 1. The undersigned is also the sole Director and the President of **BIG MAN SPOT INC**, a Florida corporation to be filed with the Florida Department of State on or about **July 15, 2019**.
- 2. The undersigned hereby consents to and authorizes the use by **BIG MAN SPOT INC**, of the name **BIG MAN SPOT INC**.
- 3. The undersigned has personal knowledge of the fact and matter set forth herein and therefore has no intentions of reinstating the dissolved entity.

FURTHER AFFIANT SAYETH NAUGHT.

STATE OF FLORIDA) SS:

COUNTY OF MIAMI-DADE)

PERSONALLY appeared before me, Anamaria Guzman, who is personally known to me, who being by my first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

Witness my hand and official seal this 15 th day of July, 2019.

STEPHANIE MARTINEZ
Notary Public - State of Florida
Commission # GG 276107
My Comm, Expires Nov 13, 2022
Bonded through National Notary Assn.

Notary Public Signature

P19000059924

Notarized Affidavit

To: Florida Department of State

Division of Corporations

I, Anamaria Guzman, Manager of **Big Man Spot**, **Inc.** with document number: **P19000059924**, let you know that I have no intention of reinstating the aforementioned entity; therefore, release the name for another entity to use.

Anamaria Guzman

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared **Anamaria Guzman**, and she is known to be the person described in and who executed the foregoing instrument and acknowledges before me that they execute the same.

Sworn to and subscribed before me this 09th day of February, 2021.

NOTARY PUBLIC, State of Florida

Commissioned Name of Notary Public

Personally known X or produced identification _

