

P19000066462

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000253907 3)))



H190002539073ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

2019 AUG 23 AM 9:22
PROFIT/LOSS STATEMENT

FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
FELIX ORCO PA**

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

** Please File this request*

Electronic Filing Menu

Corporate Filing Menu

Help

N. SAMS

AUG 26 2019

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: FELIX ORCO PA**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

5801 NW 62 Ave. # 303TAMMASC, FL 33319**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: REAL ESTATE**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: FELIX ORCO (P) Name and Title: _____Address: 5801 NW 62 Ave. # 303 Address: _____TAMMASC, FL 33319

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

FILED
2019 AUG 23 AM 9:22
STATE OF FLORIDA
TALLAHASSEE, FL

(cont.)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: FELIX ONCO
Address: 5801 NW 62 Ave #303
TAMANAC, FL 33319

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: FELIX ONCO PA
Address: 5801 NW 62 Ave #303
TAMANAC, FL 33319

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

08/22/19
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

08/22/19
Date

FILED
2019 AUG 23 AM 9:22
TAMPA, FLORIDA
CLERK OF THE COURT