

# PR00070830

Florida Department of State  
Division of Corporations  
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## FLORIDA PROFIT/NON PROFIT CORPORATION VALERIE MESA ASTROLOGY INC

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J DENNIS

SEP 17 2019

VALERIE MESA ASTROLOGY INC

ARTICLES OF INCORPORATION

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

ATX  
19 SEP 16 AM 9:38

**ARTICLE I NAME**

The name of the corporation shall be: VALERIE MESA ASTROLOGY INC

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address

11454 SW 29 ST

Mailing address, if different is:

Miami, FL 33165-2148

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: TO TRANSACT ANY AND ALL BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES OF AMERICA AND OF THE STATE OF FLORIDA.

**ARTICLE IV SHARES**

The number of shares of stock is: 10 SHARES AT \$50.00 PAR VALUE

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

Name and Title: VALERIE M. MESA, PRES

Name and Title:

Address: 11454 SW 29 ST

Address:

MIAMI, FL 33165-2148

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

VALERIE MESA ASTROLOGY INC

ATX1

13 SEP 16 AM 5:38

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: VALERIE M. MESA  
Address: 11454 SW 29 ST  
Miami, FL 33185-2148

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

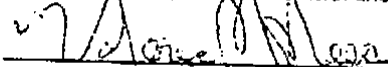
Name: VALERIE M. MESA  
Address: 11454 SW 29 ST  
Miami, FL 33185-2148

**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.

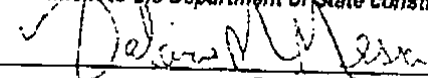
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

✓ 9/14/19  
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

✓ 9/14/19  
Date