

P190000071925

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

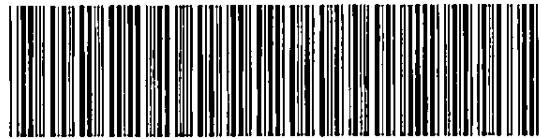
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/20/19--01003--001 **70.00

19 SEP 20 AM 8:08

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2019 SEP 20 AM 11:39
U.S. DEPT. OF JUSTICE
FBI - ALABAMA

COVER LETTER

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

LUCE INVESTMENT CORP.

SUBJECT: _____
(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: _____
Name (Printed or typed)
1411 S DIXIE HWY STE 220

Address
MIAMI, FL 33176

City, State & Zip
305 901 2249

Daytime Telephone number
LUIS@CITYTITLEFL.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

The name of the corporation shall be:

LUCE INVESTMENT CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

14411 S. DIXIE HWY. STE 228

SAME AS PRINCIPAL OFFICE ADDRESS

MIAMI, FL 33176

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

1000

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LUIS ALVAREZ, PRESIDENT

Name and Title: CELINDA ORTIZ, VP

Address: 14411 S DIXIE HWY., STE 228

Address: 14411 S DIXIE HWY., STE 228

MIAMI, FL 33176

MIAMI, FL 33176

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

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2019 SEP 20 AM 11:35
ALLAHASSEE, 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: CITY TITLE OF FLORIDA LLC

Address: 14411 S DIXIE HWY., STE 220

MIAMI, FL 33176

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LUIS ALVAREZ

Address: 14411 S DIXIE HWY., STE 228

MIAMI, FL 33176

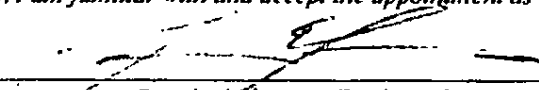
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 9/16/19. (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

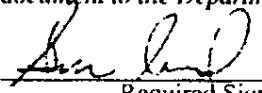


Required Signature/Registered Agent

9/16/19

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

9-16-19

Date