

P19000086792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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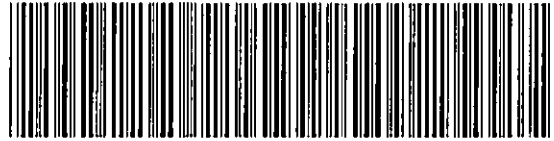
(Business Entity Name)

(Document Number)

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2019 NOV 21 AM 11:15  
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TALLAHASSEE, FLORIDA

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155 Office Plaza Dr Ste A Tallahassee FL 32301  
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**DATE: 11-21-19**

**NAME: TOTAL GLOBAL CONSULTING, CORP.**

**TYPE OF FILING: ARTICLES OF INCORPORATION**

**COST: 78.75**

**RETURN: GOOD STANDING PLEASE**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**

*Abbie Hodge*

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## COVER LETTER

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

**SUBJECT:** TOTAL GLOBAL CONSULTING, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Claudio A. Cini  
Name (Printed or typed)

2600 Douglas Road  
Address

Coral Gables, FL, 33134  
City, State & Zip

561-445-3712  
Daytime Telephone number

andreamcini@gmail.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: TOTAL GLOBAL CONSULTING, CORP.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address \_\_\_\_\_ Mailing address, if different is: \_\_\_\_\_  
2600 Douglas Road \_\_\_\_\_  
Coral Gables, FL, 33134 \_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful business

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000 (one thousand shares)

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

Name and Title: Claudio A. Cini, Director Name and Title: \_\_\_\_\_  
Address 2600 Douglas Road Address: \_\_\_\_\_  
Coral Gables, FL, 33134 \_\_\_\_\_

Name and Title: Andrea C. Martinez de Cini, director Name and Title: \_\_\_\_\_  
Address 2600 Douglas Road Address: \_\_\_\_\_  
Coral Gables, FL, 33134 \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2019 NOV 21 AM 11:15  
FILED

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: Claudio A. Cini

Address: 2600 Douglas Road  
Coral Gables, FL, 33134

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Andrea C. Martinez de Cini

Address: 2600 Douglas Road  
Coral Gables, FL, 33134

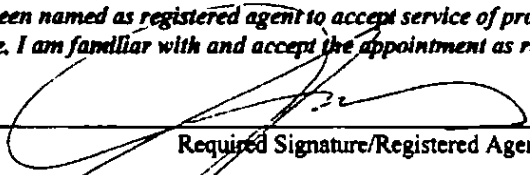
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 11/21/2019. (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.)

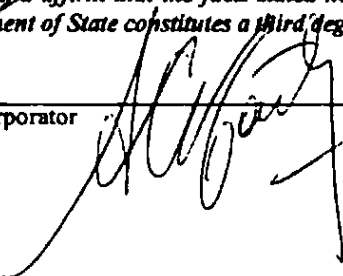
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

11/21/2019  
\_\_\_\_\_  
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

11/21/2019  
\_\_\_\_\_  
Date