## P2000000580W

<u></u>					
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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

ARTICLE II PRINC	MICHAEL VALENTI, P.A.  CIPAL OFFICE Principal street address	Mailing addre	ss, if different is:
2003 W. JOROME DRIVE		SAME	
TAMPA, FL 33612			
ARTICLE III PURPO The purpose for which t	DSE he corporation is organized is:	ATE TRANSACTIONS	
			2 ệ ệ a
<del></del>			
			<del></del>
ARTICLE IV SHAR The number of shares of			::: 10: 21
<u>ARTICLE V INITL</u>	AL OFFICERS AND/OR DIRECTORS		
Name and Title	MICHAEL VALENTI - PRESIDENT	Name and Title:	
Address	2003 W. JOROME DRIVE	Address:	
	TAMPA, FL 33612		<del></del>
			<del></del>
Name and Title	·	Name and Title:	
Address			
		_	
Name and Title	:	Name and Title:	
Address			

Name ar	nd Title:	Name and Title:	
Address	s	Address:	<del></del>
	REGISTERED AGENT		
The name and F	lorida street address (P.O. Box NOT acce	ptable) of the registered agent is:	
Name:	MICHAEL VALENTI		
Address:	2003 W JOROME DR		
	TAMPA, FL 33612		5599 J.A. 127
			<u>.                                    </u>
ARTICLE VII	<u>INCORPORATOR</u>		·
			<u> </u>
The name and a	address of the Incorporator is:		1.
Name:	MICHAEL VALENTI	<del></del>	<u>0</u>
Address:	2003 W JOROME DR	<del></del>	<del>2</del>
	TAMPA, FL 33612	<del></del>	
ARTICLE VIII	EFFECTIVE DATE:	(OPTIONAL)	
(If an effective filing.)	f other than the date of filing:		or or 90 days after the
	te inserted in this block does not meet the ap effective date on the Department of State's		this date will not be listed as
Having been na this certificate, i	med as registered agent to accept service of I am familiar/with and accept the appointm	of process for the above stated corpora ent as registered agent and agree to ac	tion at the place designated in t in this capacity
	ichael Valore	SIGNHERE	1/24/2020
	Required Signature/Registered A	gent	Date
I submit this do	ocument and affirm that the facts stated h	erein are true. I am aware that the fal	lse information submitted in a
document to the	Department of State constitutes a third dep	gree felony as provided for in s.817.155	), F.S.
Mi	chad a Valent	SIGNHERE	1/24/2020
Requ	uired Signature/Incorporator		Date