Pad 0000028956

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





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U4/09/20--01097--024 **70.00

COVER LETTER

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

SUBJECT:	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	ÚDE <u>SUFFIX</u>)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
■ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CC	DPY REQUIRED
lor	ge Avina		
FROM:		e (Printed or typed)	
	(Addit	e (trimed or typed)	
542	Springdale Cir.		

Palm Springs, FL 33461

jjorgeavina@gmail.com

561-385-4223

NOTE: Please provide the original and one copy of the articles.

City, State & Zip

Daytime Telephone number

a@gmail.com

E-mail address: (to be used for future annual report notification)

Name a	und Title:	Name and Title:
Addre	88	
	REGISTERED AGENT	All Sea Control
Name:	Florida street address (P.O. Box NOT acce Jorge Avina	ptable) of the registered agent is:
Address:	542 Springdale Cir.	
	Palm Springs, FL 33461	
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>	202 0
The name and a	address of the Incorporator is:	
Name:	Jorge Avina	2020 APR -9 PM SECONDARY OF BITALL AHASSEE
Address:	542 Springdale Cir.	
	Palm Springs, FL 33461	2: 56 STATE E.F.L
Effective date, i		. (OPTIONAL) and cannot be more than five business days prior or 90 business
	te inserted in this block does not meet the apericetive date on the Department of State's	oplicable statutory filing requirements, this date will not be listed as records.
		of process for the above stated corporation at the place designated t ent as registered agent and agree to act in this capacity
	Joseph Ovino Required Signature/Registered A	gent $\frac{3/30/30}{Datc}$
I submit this do	ocument and affirm that the facts stated ho	erein are true. I am aware that the false information submitted in tree felony as provided for in s.817.155, F.S.
	Jorga Usino gred Signature/Incorporator	3/20/20
Keq	Auted 21 Sugarture/Incorporator	' Date

. . . .

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

42 Springdale Cir.	NCIPAL OFFICE Principal <u>street</u> address		Mailing address, if different is:			
alm Springs, FL 33						
RTICLE III PUR he purpose for whic adio Broadcasting a	h the corporation is organized is:					
					- 1	
RTICLE IV SILA	RES 100 of stock is:		SECKLIAHASSI TALLAHASSI	2020 APR -9 PM		
				_ 8_		
Name and T	tal OFFICERS AND/OR DIRECTORS itle: 542 Springdale Cir.		لبا	2: 56	(fried	
			Dinora Robelo	2:56		
Name and T Address	ide: ^{Jorge} Avina 542 Springdale Cir.	Address: Name and Title Address:	Dinora Robelo	2:56		