

P200000065627

(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

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20:10 - 7 PM 5:00

C RICO
AUG 07 2020

COVER LETTER

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

SUBJECT: Fränzolo of Miami Inc
(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Felix C Garcia
 Name (Printed or typed)

10750 SW 24th Street
 Address

Miami Fl 33165
 City, State & Zip

305 551 4959
 Daytime Telephone number

FGarcia Taxes 1@BellSouth.Net
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: Franzolo of Miami Inc

ARTICLE II PRINCIPAL OFFICE

| | |
|---|--|
| Principal <u>street</u> address <u>10750 SW 24th Street</u> <u>Miami FL 33165</u> | Mailing address, if different is: _____ _____ _____ |
|---|--|

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To have any kind of Legal Business
Activities in the Continental United States of America

ARTICLE IV SHARES

The number of shares of stock is: 100 Shares Common Stock \$ 1.00 Par Value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Emmanuel A Lopez Pres Name and Title: _____

| | |
|---|----------------------------------|
| Address <u>2555 Collins Ave # 1911</u> <u>Miami Beach FL 33140</u> | Address: _____ _____ _____ |
|---|----------------------------------|

Name and Title: Micaela Ledesma V. Pres Name and Title: _____

| | |
|---|----------------------------------|
| Address <u>2555 Collins Ave # 1911</u> <u>Miami Beach FL 33140</u> | Address: _____ _____ _____ |
|---|----------------------------------|

Name and Title: _____ Name and Title: _____

| | |
|---------------------------------|----------------------------------|
| Address _____ _____ _____ | Address: _____ _____ _____ |
|---------------------------------|----------------------------------|

RECORDED
20 DEC - 7 PM 5:00

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: Felix C Garcia
Address: 10750 SW 24th Street
Miami FL 33165

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Felix C Garcia
Address: 10750 SW 24th Street
Miami FL 33165

20 AUG - 7 PM 5:00
RECEIVED
CLERK OF THE COURT
JANUARY 1, 2020


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: Aug 03/20 (OPTIONAL)

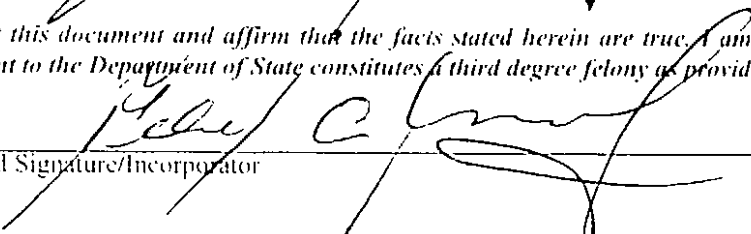
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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

 Aug 03/20
Required Signature/Registered Agent 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.

 Aug 03/20
Required Signature/Incorporator Date

- Article V: The names, address and titles of the Directors/Officers (**optional**). The names of officers/directors may be required to apply for a license, open a bank account, etc.
- Article VI: The name and **Florida Street address** (P.O. Box **NOT** acceptable) of the initial Registered Agent. The Registered Agent **must** sign in the space provided and type or print his/her name accepting the designation as registered agent.
- Article VII: The name and address of the Incorporator. The Incorporator **must** sign in the space provided and type or print his/her name below signature.

The “incorporator” is the person who prepares and signs the Articles of Incorporation and then submits them for filing to the Division of Corporations. The function of the incorporator usually ends after the corporation is filed.

An Effective Date: Add a **separate** article if applicable or necessary: An effective date **may** be added to the Articles of Incorporation, otherwise the date of receipt will be the file date. (An effective date can not be more than five (5) days prior to the date of receipt or ninety (90) days after the date of filing). **If a corporation is filed anytime prior to December 31st, an annual report will be due on January 1st.**

Important Information About the Requirement to File an Annual Report

All Florida Profit Corporations must file an Annual Report yearly to maintain “active” status. The first report is due in the year following formation. The report must be filed electronically online between January 1st and May 1st. The fee for the annual report is \$150. After May 1st a \$400 late fee is added to the annual report filing fee. “Annual Report Reminder Notices” are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1st, go to our website at www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st.

The fee for filing a profit corporation is:

| | |
|----------------------------------|---|
| Filing Fee | \$35.00 |
| Designation of Registered Agent | \$35.00 |
| Certified Copy (optional) | \$ 8.75 (plus \$1 per page for each page over 8, not to exceed a maximum of \$52.50). |
| Certificate of Status (optional) | \$ 8.75 |

Make checks payable to: Florida Department of State

Mailing Address:

New Filing Section
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
(850) 245-6052

Street Address:

New Filing Section
Department of State
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303
(850) 245-6052