

P20000086657

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

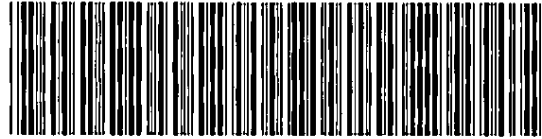
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2020 NOV -6 PM 2:54

CLERK OF COURT
TALLAHASSEE, FL

FILED

2020 NOV -6 AM 10:17

SECRETARY OF STATE
TALLAHASSEE, FL

Re

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

RIVKA QUARTERS CORP.

Signature _____

Requested by: BA

11/05

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

- ☒ Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- _____ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- _____ Cert. Copy _____
- ☒ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

COVER LETTER

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

SUBJECT: Rivka Quarters 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

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

FROM: Mimi Bared

Name (Printed or typed)

201 Alhambra Circle, Suite 501

Address

Coral Gables, FL 33134

City, State & Zip

305-666-6010

Daytime Telephone number

mimi@baredlaw.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 Rivka Quarters Corp.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
201 Alhambra Circle, Suite 501
Coral Gables, FL 33134

Mailing address, if different is:
201 Alhambra Circle, Suite 501
Coral Gables, FL 33134

ARTICLE III PURPOSE

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

ARTICLE IV SHARES

The number of shares of stock is: 100 Shares at \$1.00 Par Value.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Marcos Marcovich, D
Address: 201 Alhambra Circle, Suite 501
Coral Gables, FL 33134

Name and Title: _____
Address: _____

Name and Title: Rebeca Reyna Schneeweiss Smursz, D/P
Address: 201 Alhambra Circle, Suite 501
Coral Gables, FL 33134

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Pablo R. Bared, Esq.
Address: 201 Alhambra Circle, Suite 501
Coral Gables, FL 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Pablo R. Bared, Esq.
Address: 201 Alhambra Circle, Suite 501
Coral Gables, FL 33134

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

November 5, 2020

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

November 5, 2020

Date

2020 NOV -6 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FL

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