

P20000088252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

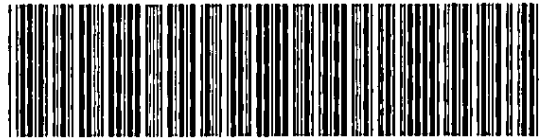
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/11/20 --01002 --002 **70.00

2020 AUG 11 PM 3:54
STATE
SECRET

July 28, 2020

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

Re: GALLEGO ADULT HOME INC

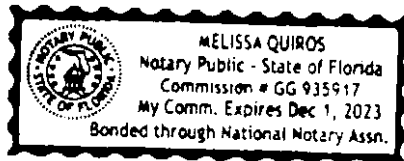
To whom it may concern:

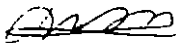
By means of this letter I am advising that I have no intentions of re-instating the above mentioned dissolved corporation.

Should you have any questions or concerns please do not hesitate to contact me.

Sincerely,


MARIA C. MARQUEZ





2020 Aug 11 PM 3:54
JME
08 FL

COVER LETTER

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

SUBJECT: Gallego Adult Home 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: Maria E. Ruiz
Name (Printed or typed)

7750 SW 117th Ave. Suite 201D
Address

Miami, FL 33183
City, State & Zip

305-595-2407
Daytime Telephone number

maria.g.ruiz9@hotmail.com
E-mail address: (to be used for future annual report notification)

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

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FILED
TALLAHASSEE, FL

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: Gallego Adult Home, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

13225 SW 46 Terrace
Miami, FL 33175

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all legal purposes.

ARTICLE IV SHARES

The number of shares of stock is: 100 @ \$1.00 each

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

(President)

Name and Title: Maria Christina Marquez Name and Title: _____

Address 12820 SW 74 St. Address: _____

Miami, FL 33186

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

2020 AUG 11 PM 3:54
STATE
OF FL

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: Maria C. Marquez

Address: 13225 SW 46 Terr.

Miami FL 33175

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Maria C. Marquez

Address: 13225 SW 46 Terrace

Miami FL 33175

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 8/15/2020 (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

Maria Marquez
Required Signature/Registered Agent

07-30-20
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.

Maria Marquez
Required Signature/Incorporator

07-30-20
Date

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