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1/12/2021

Division of Corporations

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
MARIA VINA RODRIGUEZ, P.A.

Certificate of Status	0
Certified Copy	1
Page Count	03
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J DENNIS
JAN 13 2021

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

ARTICLE I NAMEThe name of the corporation shall be: MARIA VINA RODRIGUEZ, P.A.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

11131 SW 84TH CTMIAMI, FL 33156**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: THE PURPOSE OF THE BUSINESS IS REAL ESTATE.**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: MARIA VINA RODRIGUEZ (P)

Name and Title: _____

Address

11131 SW 84TH CT

Address: _____

MIAMI, FL 33156

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

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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: PINNACLE TAX & ACCOUNTING GROUP LLCAddress: 186 SE 12 TERRACE STE 1408MIAMI, FL 33131ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARIA VINA RODRIGUEZAddress: 11131 SW 84TH CTMIAMI, FL 33156ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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.*Jose Padial
Required Signature/Registered Agent1/12/2021

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 V. Urea
Required Signature/Incorporator1-6-2021
Date