Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : PADRON AND ASSOCIATES INC.

Account Number : I20060000156 Phone : (305)818-0404 Fax Number : (305)818-0898

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			
CMGTT	MUUIESSA			

FLORIDA PROFIT/NON PROFIT CORPORATION SOUTHEAST CONSULTING AND DEVELOPERS INC.

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COVER LETTER

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

SUBJECT:	SOUTHEAST CONSULTING AND DEVELOPERS INC.				
oobber.	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)		
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	i a check for:		
∝\$70.00 Filing Fec	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fec, Certified Copy & Certificate of Status DPY REOUIRED		
FROM:		& ASSOCIATES, INC.			
	2095	5 W 76TH STREET			
	HIALEAH, FL 33016				
	City, State & Zip				
	305-818-0404				
	Daytime Telephone number				
	ralph@ralphpadron.com E-mail address: (to be used for future annual report notification)				
	E-mail address: (to be used	i for future annual report n	otification)		

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)

he name of the corporati	tion shall be: SOUTHEAST CONSU	LTING AND DEVELOPERS INC.	
<i>irticle II - princ</i> 2095 W 76TH ST	Principal street address	Mailing address, if different is:	
SUITE 158			
HIALEAH, FL 33	3016		21
ARTICLE III PURPO)SF		E E
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ANY AND A	ALL LAWFUL BUSINESS.		7
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	*·····································		
	L OFFICERS AND/OR DIRECTORS		
Name and Title	SERGIO BENITEZ JR PSTD	Name and Title:	
Address	2095 W 76TH ST	Address:	
	SUITE 158		
	HIALEAH, FL 33016		
Name and Title:		Name and Title:	
Address		Address:	
			·
			
Name and Title:		Name and Title:	
Address		Address:	
		-	

Name a	nd Title:	Name and Title:
Addres		Address:
		· · · · · · · · · · · · · · · · · · ·
	REGISTERED AGENT Street address (P.O. Box NOT acceptable)	of the registered agent is:
Name:	PADRON & ASSOCIATES, INC.	
Address:	2095 W 76TH STREET - STE 102	_
	HIALEAH, FL 33016	
ARTICLE VII	INCORPORATOR	
The name and a	ddress of the Incorporator is:	
Name:	SERGIO BENITEZ JR.	_
Address:	2095 W 76TH ST - STE 158	_
	HIALEAH, FL 33016	_
Effective date, if	EFFECTIVE DATE: Tother than the date of filing: Chate is listed, the date must be specific and cannot be specifically and cannot be specific and cannot be spec	
Note: If the date the document's e	e inserted in this block does not meet the applicable feetive date on the Department of State's records	e statutory filing requirements, this date will not be listed as
	familiar with predicted the appointment as registe	for the above stated corporation at the place designated in this cred agent and agree to act in this capacity 2 1 2
I submit this doc	Granifed Signature/Registered Agent sument and affirm that the facts stated herein are	Date true. I am aware that the false information submitted in a
document to the	Department of State constitutes a hird degree felor	ny as provided for in s.817.155, F.S.
Required Signatu	ure/Incorporator	Date 2/16/2021