

2/23/2021

Division of Corporations

P21000016826

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000074949 3)))



H210000749493ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LEGALZOOM.COM INC.
Account Number : 120010000062
Phone : (323)962-8600
Fax Number : (323)962-3889

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
FAMILY SQUAD PROPERTIES Corp.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

RECEIVED
2021 FEB 23 PM 4:16
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

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

SUBJECT: FAMILY SQUAD PROPERTIES 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: Cheyenne Moseley, Legalzoom.com, Inc.

Name (Printed or typed)

101 N. Brand Blvd., 11th Floor

Address

Glendale, CA 91203

City, State & Zip

323-962-8600 ext. 7625

Daytime Telephone number

onlinefilings@Legalzoom.com

E-mail address: (to be used for future annual report notification)

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

2021 FEB 23 PM 3:35

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: FAMILY SQUAD PROPERTIES Corp.

ARTICLE II PRINCIPAL OFFICEPrincipal ~~street~~ address

Mailing address, if different is:

12816 SW 70 Ln

Miami, FL 33183

ARTICLE III PURPOSE

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

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SAADIA USCATEGUI, PD

Address: 10321 SW 141 STREET
Miami, FL 33176

Name and Title: OMAR MINAYA, TD

Address: 16 Esposito Dr
Fairfield NJ 07004

Name and Title: MARCUS NAVARRO, SD

Address: 12004 BURTON ST
CLERMONT FL 34711

Name and Title: WILLIAM SOTO, D

Address: 4007 WOODACRE LANE
TAMPA FL 33624

Name and Title: IDELKYS MINAYA, D

Address: 16 Esposito Dr
Fairfield NJ 07004

Name and Title: PAULA NAVARRO, D

Address: 12004 BURTON ST
CLERMONT FL 34711

2021 FEB 23 PM 3:35

Name and Title: JOSE ABEL MINAYA, DAddress: 2110 W SPRUCE STREET
TAMPA FL 33607Name and Title: IRENE RAMIREZ, DAddress: 2110 W SPRUCE STREET
TAMPA FL 33607**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: SAADIA USCATEGUIAddress: 10321 SW 141 STREET
MIAMI, FL 33176**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: Cheyenne Moseley, Legalzoom.com, Inc.Address: 101 N. Brand Blvd., 11th Floor
Glendale, CA 91203

2021 FEB 23 PM 3:35

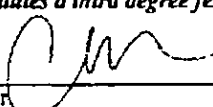
ARTICLE VIII EFFECTIVE DATE:

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 business days prior or 90 business 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.*

Required Signature/Registered Agent SAADIA USCATEGUI1/5/2021

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.*

Required Signature/Incorporator02/23/2021_____
DateCHEYENNE MOSELEY, US CORP.
AGENTS