P21000220834

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.

(((H21000090238 3)))

H21000090238 3ABCZ

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 : FLORIDA ACCOUNTING & BUSINESS CONSULTING LLC
Account Number : 120200000185
Phone : (754)200-4294
Fax Number : (844)254-4044

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

Email Address: Fabc.Taxes@Gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION
FRANMARLIN SALAZAR, P.A

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	$78.75

RECEIVED
2021 MAR -5 AM 10:52
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
COMMERCIAL RECORDING SERVICES

Electronic Filing Menu Corporate Filing Menu Help

FILED
21 MAR -5 PM 2:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Fran Marlin Salazar, P.A

ARTICLE II PRINCIPAL OFFICE

Principal street address

893 Malcolm Chandler Ln 108
West Palm Beach FL 33401

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any Real Estate Business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Fran Marlin Salazar (P)

Address 893 Malcolm Chandler Ln 108
West Palm Beach FL 33401

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

FILED
21 MAR -5 PM 2:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(cont'l)

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: Florida Accounting & Business Consulting LLC

Address: 2764 Davie Blvd.

Fort Lauderdale FL 33312

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Franklin Salazar

Address: 893 Nakoma Chandler Ln 108

West Palm Beach FL, 33401

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

_____ 3/3/2021

Required Signature/Registered Agent 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.

_____ 3/3/2021

Required Signature/Incorporator Date

FILED

21 MAR -5 PM 2:23

SECRETARY OF STATE

TALLAHASSEE, FLORIDA