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# FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

5/7/2021

NAME:

1720 Miam Gadens Flor :

TYPE OF FILING: ARTICLES

COST:

70.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

abbie Hodge

# **COVER LETTER**

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

SUBJECT:	BJECT: 1720 Miami Gardens Florida Corp.				
	(PROPOSED CORPORA	TE NAME - MUST INCLU	JDE SUFFIX)		
Enclosed are an orig	ginal and one (1) copy of the art	cicles of incorporation and	a check for:	1	
⊠ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status		
FROM:		Printed or typed)		2021 rt.	
		Address			
	. ,	# 10: 44 U			
	Daytime 1	Felephone number			
	team@	globaltaxes.com			
<del></del>	F-mail address: (to be use	d for future annual report r	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)

ARTICLE I	<u>NAME</u>	1720 Miami Garden	is Florida Corp.			
I ne name of th	e corporation shall be:		<del></del>			
ARTICLE II	PRINCIPAL OFFICE		,	4-10	A 1	
1720 NW 1	Principal <u>street</u> 83rd Street		clo	Mailing address, if differen GT 667 Madison Ave	:. 5th Fl	
Miami Gar	83rd Street dens, Fl 33056		Ne	w York, NY 10065		
			<del></del>			
			<del> </del>			
ARTICLE III						
The purpose fo	r which the corporation is	s organized is:		<del></del>	·	
The purpos	e of the corporation i	is to engage in any law	ful activity for v	hich corporations ma	ı <u>y</u> be	_
incorporate	ed in this state					
- incorporate	ed in this state.			"-		
			<del></del>		<del></del>	•
						_
			<del></del>			
			<del></del>			•
					بر دي س	
ARTICLE IV	SHARES				613 120 120 120 120 120 120 120 120 120 120	
The number of	shares of stock is: 1					
					<u>-1</u>	•
ARTICLE V	INITIAL OFFICERS	4ND/OR DIRECTORS			· · · · · · · · · · · · · · · · · · ·	;
N	and Tista. Charles Iosanh i	Harari Perez, Director/Preside	ent Nome and Title			·
Name	and Title: Charles Joseph I	Tarati Felez, Director/Freside	M Name and Title	····	• •	•••
Addre	:ss <u>PH Bayside, Ap</u>	to. 27	Address:		<u> </u>	
	Calle Winston C	Churchill, Punta Paitilla				
			-			
	Panama City, Pa	anama	<del>_</del>			
Name	and Title: David Joseph Ha	rari Perez, Director/Secretary	_ Name and Title			,
Addre	SS PH The Point, A	Apto. 26-B	Address:			
	C 11 . Wil	Churchill, Punta Paitilla	_			
	Calle Winston C	nurchill, Punta Pattilla	<del>_</del>			
	Panama City, P	anama		<del></del> .		
Name :	and Title: Murad Joseph H	arari Perez, Director/Treasure	Name and Title			
Addre	ess <u>PH Bayside, Ap</u>	oto. 25	Address:			
	Calle Winston (	Churchill, Punta Paitilla	<del></del>			
	n					
	<u>Panama City, P</u>	anania	<del></del>			

Name and Title:		Name and Title:	Name and Title:		
Address		Address:			
ADTICLE IVI D	DECISTED ON ACENT				
	REGISTERED AGENT  orida street address (P.O. Box NOT accepta	ble) of the registered agent is:			
Name:	Paracorp Incorporated				
Address:	155 Office Plaza Drive, 1st Floor				
	Tallahassee, FL 32301		2921		
		<del></del>	70. 20. 		
ARTICLE VII	NCORPORATOR				
The name and ad	dress of the Incorporator is:		-		
Name:	Michael Miller-McCreanor		7.5		
Address:	2140 S Dupont Highway	<u></u>			
	Camden, DE 19934	<del></del>			
Effective date, if o	EFFECTIVE DATE: other than the date of filing: the is listed, the date must be specific and	. (OPTIONAL)	or 90 days after the		
	inserted in this block does not meet the app fective date on the Department of State's re		is date will not be listed as		
Having been name certificate, I am fa	ed as registered agent to accept service of promiliar with and accept the appointment as t	ocess for the above stated corporation a egistered agent and agree to act in this	t the place designated in this capacity		
See Attached Co	nsent		3/7/2021		
	Required Signature/Registered Age	nt	Date		
I submit this docu document to the D	iment and affirm that the facts stated here epartment of State constitutes a third degre	in are true. I am aware that the faise e felony as provided for in s.817.155, F	information submitted in a .S.		
IMA MELLI	1-1/1/1/	-	5/7/2021		
Required Signatur	e/Incorporator	Date			

# STATE OF FLORIDA

## REGISTERED AGENT CONSENT FORM

DATE: 5/7/2021

ENTITY NAME: 1720 Mianti Gardens Florida Corp.

# REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated
155 Office Plaza Drive, 1st Floor
Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated