

P210000043442

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6331

From:

Account Name : TRAMILEX LLC
Account Number : I20150000086
Phone : (786) 469-9163
Fax Number : (305) 848-3716

****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
ROA & STRUBINGER CORP**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

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

SUBJECT: ROA & STRUBINGER 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: MARIELA STRUBINGER GERIK

Name (Printed or typed)

3421 SW 21 ST

Address

MIAMI FL 33145

City, State & Zip

(786) 695-5295

Daytime Telephone number

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

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

2021 MAY 12 AM 9:59

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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: ROA & STRUBINGER CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address
3421 SW 21 STMIAMI FL 33145

Mailing address, if different is:

SAME ADDRESS**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: MARIELA STRUBINGER GERIK. PAddress: 3421 SW 21 STMIAMI FL 33145

Name and Title: _____

Address: _____

Name and Title: JHONNY R. ROA GORDILLO. VPAddress: 3421 SW 21 STMIAMI FL 33145

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

2021 MAY 12 AM 9:59

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Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MARIELA STRUBINGER GERIK
Address: 3421 SW 21 ST
MIAMI FL 33145

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: MARIELA STRUBINGER GERIK
Address: 3421 SW 21 ST
MIAMI FL 33145

ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: 05/11/2021 (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

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/Incorporator

Date

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