

P21000066100

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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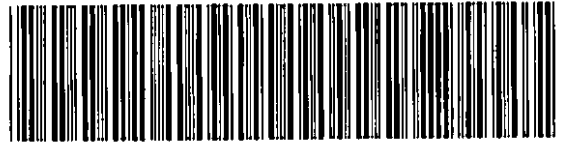
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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**CORPORATE
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INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
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INC

1. PATRICIA A. CORDERO LOPEZ P.A.

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

COVER LETTER

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

SUBJECT: Patricia A. Cordero Lopez P.A.
(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	☐ \$87.50
Filing Fee	Filing Fee.
& Certified Copy	Certified Copy
	& Certificate of
	Status

ADDITIONAL COPY REQUIRED

FROM: Patricia A. Cordero Lopez
Name (Printed or typed)

15229 Seaglass Terrace Lane
Address

Delray Beach Florida 33446
City, State & Zip

954-994-9982
Daytime Telephone number

Corderopatricia@hotmail.com
E-mail address: (to be used for future annual report notification)

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 NAME

The name of the corporation shall be:

Patricia A. Cordero-Lopez P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

15229 Seaglass Terrace
Lane, Delray Beach

Mailing address, if different is:

FL 33446

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate Services

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Patricia A. Cordero-Lopez

Name and Title:

President.

Address

15229 Seaglass Terrace
Lane, Delray Beach
FL 33446

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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TALLAHASSEE, FL

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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: Patricia A. Corden Lopez

Address: 15229 Seaglass Terrace Ln
Del Ray Beach FL 33446

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Patricia A. Corden Lopez

Address: 15229 Seaglass Terrace Ln
Del Ray Beach FL 33446

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 days prior or 90 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

07-19-2021
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/Incorporator

07-19-2021
Date

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