

8/11/2021

Division of Corporations

P210 00072115

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : LAMADRID FINANCIAL SERVICES CORP
Account Number : I20200000059
Phone : (954)727-9771
Fax Number : (954)727-9773

****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
PERALTA COMERCIAL YADY CORP**

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

FILED
21 AUG 11 PM 12:43
TALLAHASSEE, FLORIDA

2021 AUG 11 PM 4:14

COVER LETTER

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

SUBJECT: PERALTA COMERCIAL YADY 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Alexis Lamadrid

Name (Printed or typed)

10154 W Flagler Street

Address

MIAMI, FL 33174

City, State & Zip

305-480-0269

Daytime Telephone number

info1@lamadridfinancial.com

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

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

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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: PERALTA COMERCIAL YADY CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address
9621 FOUNTAINEBLEAU BLVD APT-612, MIAMI, FL 33172

Mailing address, if different is:

SAME**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Any and all lawfull business**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Yady Peralta - President

Name and Title: _____

Address 9621 Fountainebleau Blvd

Address: _____

Apt -612MIAMI, FL 33172

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
21 AUG 11 PM 12:43
CLERK OF DISTRICT COURT
MIAMI, FLORIDA

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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: Lamadrid Financial Services Corp
 Address: 10154 W Flagler Street
Miami, Florida 33174

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: YADY PERALTA
 Address: 9621 Fountainebleau Blvd Apt-612
MIAMI, FL 33172

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*

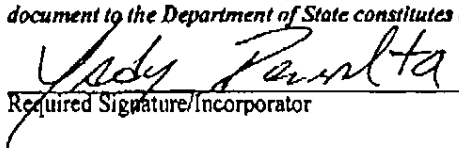


 Required Signature/Registered Agent

08/11/2021

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

08/11/2021
 Date

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