

P21000077323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

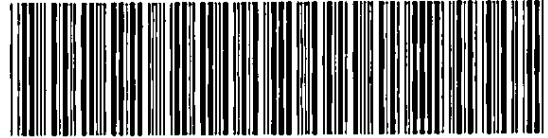
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL

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SECRETARY OF STATE  
TALLAHASSEE, FL



Department of State  
Division of Corporations  
Date: 08/30/2021

American Expediting (Stealth Courier)  
1531 Commonwealth Business Dr.  
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Tallahassee, Fl. 32303  
850-294-5632

## **Stealth Courier Box**

**Company:** ACG Property Management Inc.  
**Requester:** Achieve Capital  
**Order:** 13390364

**COVER LETTER**

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

ACG PROPERTY MANAGEMENT INC

**SUBJECT:** \_\_\_\_\_  
**(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**

PATRICIO FRIAS

**FROM:** \_\_\_\_\_  
Name (Printed or typed)

9907 THREE LAKES CIR

\_\_\_\_\_  
Address

BOCA RATON, FLORIDA, 33428

\_\_\_\_\_  
City, State & Zip

561 451 6330

\_\_\_\_\_  
Daytime Telephone number

OPERATIONS@ACHIEVEGEEA.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)

SECRETARY OF STATE  
TALLAHASSEE, FL

ARTICLE I NAME

ACG PROPERTY MANAGEMENT INC

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9907 THREE LAKES CIR

BOCA RATON, FLORIDA, 33428

ARTICLE III PURPOSE

ANY LAWFULL BUSINESS

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

1000

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RAMIREZ, GORKI P

Name and Title:

Address 9907 THREE LAKES CIR

Address:

BOCA RATON, FLORIDA, 33428

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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: PATRICIO FRIAS  
 Address: 9907 THREE LAKES CIR  
BOCA RATON, FLORIDA, 33428

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: PATRICIO FRIAS  
 Address: 9907 THREE LAKES CIR  
BOCA RATON, FLORIDA, 33428

**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 8/30/2021  
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 8/30/2021  
Date

SECRETARY OF STATE  
 TALLAHASSEE, FL

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