

10/21/21, 10:02 AM

Division of Corporations

Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
AVILES FINANCIAL GROUP, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: AVILES FINANCIAL GROUP, INC.**ARTICLE II PRINCIPAL OFFICE**

Principal street address

220 WEST PARK DR UNIT 202
MIAMI, FL 33172

Mailing address, if different is:

220 WEST PARK DR UNIT 202
MIAMI, FL 33172**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS STE 202**ARTICLE IV SHARES**The number of shares of stock is: SHARES: 100 @ \$1.00**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: VERONICA AVILEZ - P

Name and Title: _____

Address 220 WEST PARK DR UNIT 202
MIAMI, FL 33172

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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C:\Users\yanet\Documents\ARTICLES OF INCORPORATION.docx

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: VERONICA AVILEZAddress: 220 WEST PARK DR UNIT 202MIAMI, FL 33172**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: VERONICA AVILEZAddress: 220 WEST PARK DR UNIT 202MIAMI, FL 33172**ARTICLE VIII EFFECTIVE DATE:**Effective date, if other than the date of filing: JAN 01, 2022 (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 Agent10-20-21
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/Incorporator10-20-21
Date