

**Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
IULIA BERNARD, P.A**

Certificate of Status	0
Certified Copy	1
Page Count	03
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T. SCOTT

JAN 12 2022

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

ARTICLE I NAMEThe name of the corporation shall be: Julia Bernad, P.A.**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address

Mailing address, if different is:

50 Biscayne Blvd
apt 5004
Miami, FL 33132

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: Real Estate**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: President Julia Bernad Name and Title: _____Address: 50 Biscayne Blvd Address: _____
apt 5004
Miami, FL 33132

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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(cont.)

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: Iulia Bernad
Address: 50 Biscayne Blvd apt 5004
Miami, FL 33132

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Iulia Bernad
Address: 50 Biscayne Blvd apt 5004
Miami, FL 33132

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

10/01/2021
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

10/01/2021
Date