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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION
MAYKEL RIVERA MORENO PA

Certificate of Status	0
Certified Copy	0
Page Count	01
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COVER LETTER

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

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TALLAHASSEE FLORIDA

SUBJECT: MAYKEL RIVERA MORENO 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 Filing Fee & Certified Copy
- ☐ $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: MAYKEL RIVERA MORENO
Name (Printed or typed)

5821 PALM AVE
Address

HIALEAH, FL 33012
City, State & Zip

(786) 370-4447
Daytime Telephone number

maykelrealtor@gmail.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 NAME

The name of the corporation shall be: MAYKEL RIVERA MORENO P.A

ARTICLE II PRINCIPAL OFFICE

Principal street address

5821 PALM AVE

HIALEAH, FL 33012

Mailing address, if different is:

SAME ADRESS

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATES SALES.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MAYKEL RIVERA MORENO, P

Address 5821 PALM AVE

HIALEAH, FL 33012

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

H22000056790 3

H220000567403

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: MAYKEL RIVERA MORENO

Address: 5821 PALM AVE

HIALEAH, FL 33012

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: MAYKEL RIVERA MORENO

Address: 5821 PALM AVE

HIALEAH, FL 33012

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TALLAHASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 02/11/2022 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business 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

_____ 02/11/2022

Required Signature/Registered Agent 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.

_____ 02/11/2022

Required Signature/Incorporator Date

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