

P220000 16328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FL

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 511161 8372212

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE : February 23, 2022

ORDER TIME : 4:54 PM

ORDER NO. : 511161-001

CUSTOMER NO: 8372212

DOMESTIC FILING

NAME: SAM THYPIN-BERMEO PA

EFFECTIVE DATE:

XXX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

EXAMINER'S INITIALS: _____

COVER LETTER

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

SUBJECT: SAM THYPIN-BERMEO PA

(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: Sam Thypin-Bermeo
Name (Printed or typed)

1791 SW 24th Ter.
Address

Miami, Florida, 33145
City, State & Zip

609 ~~609~~ 610 1068
Daytime Telephone number

sthypin.bermeo@gmail.com
E-mail address: (to be used for future annual report notification)

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

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: SAM THYPIN-BERMEO PA

ARTICLE II PRINCIPAL OFFICE

Principal street address
3390 Mary Street Suite 111

Mailing address, if different is:

Coconut Grove, FL 33133

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Law firm

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sam Thypin-Bermeo, President/Director

Name and Title: _____

Address 3390 Mary Street, Suite 111

Address: _____

Coconut Grove, FL 33133

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED
2022 MAR -3 AM 11:30
ST. LOUIS, MO
CLERK OF COURT
JILL HASSE, CLERK

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: Corporation Service Company

Address: 1201 Hays Street

Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

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

Name: Sam Thypin-Bermeo

Address: 3390 Mary Street, Suite 111

Coconut Grove, FL 33133

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

Eugen Bermeo Adt. VP
Required Signature/Registered Agent

3/3/22
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.

Sam Thypin-Bermeo
Required Signature/Incorporator

2/24/2022
Date