

PA2000030344  
Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : ADRIAN TAX SERVICES INC.  
Account Number : I20220000042  
Phone : (786)370-2432  
Fax Number : (305)266-5758

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: vigovigocpa@aol.com

FLORIDA PROFIT/NON PROFIT CORPORATION  
LISETTE M. MARTINEZ PA

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CORPORATIONS  
COMMERCIAL  
SERVICES

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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Electronic Filing Menu

Corporate Filing Menu

Help

(((H22000144481 3)))

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: LISETTE M. MARTINEZ PA

ARTICLE II PRINCIPAL OFFICE

Principal street address

8554 SW 129TH TER  
MIAMI, FL 33156

Mailing address, if different is:

8554 SW 129TH TER  
MIAMI, FL 33156

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LISETTE M. MARTINEZ / P.S.T Name and Title:

Address 8554 SW 129TH TER Address:  
MIAMI, FL 33156

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

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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: LISETTE M. MARTINEZ  
 Address: 8554 SW 129TH TER  
MIAMI, FL 33156

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: LISETTE M. MARTINEZ  
 Address: 8554 SW 129TH TER  
MIAMI, FL 33156

**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*

*Lisette Martinez*  
 Required Signature/Registered Agent

04/21/2022  
 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.*

*Lisette Martinez*  
 Required Signature/Incorporator

04/21/2022  
 Date

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