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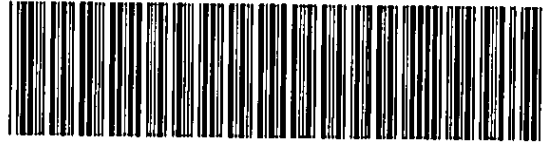
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## COVER LETTER

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

SUBJECT: JHON ARISTIZABAL 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      ☒ \$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: JHON ARISTIZABAL  
Name (Printed or typed)

894 SW 9TH CIRCLE UNIT 10  
Address

BOCA RATON, FL 33486  
City, State & Zip

9542250352  
Daytime Telephone number

wannainversiones@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: JHON ARISTIZABAL P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address Mailing address, if different is:  
894 SW 9TH CIRCLE UNIT 10, BOCA RATON FL 33486

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE, SALE, PURCHASE AND MANAGMENT PROPERTIES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	JHON ARISTIZABAL / PRESIDENT	Name and Title:	
Address	894 SW 9TH CIRCLE UNIT 10 BOCA RATON, FL 33486	Address:	
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	

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: JHON ARISTIZABAL

Address: 894 SW 9TH CIRCLE UNIT 10

BOCA RATON, FL 33486

**ARTICLE VII INCORPORATOR**

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

Name: JHON ARISTIZABAL

Address: 894 SW 9TH CIRCLE UNIT 10

BOCA RATON, FL 33486

**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*

\_\_\_\_\_  
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.*

\_\_\_\_\_  
Required Signature/Incorporator

\_\_\_\_\_  
Date