

P22 0000 47555

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

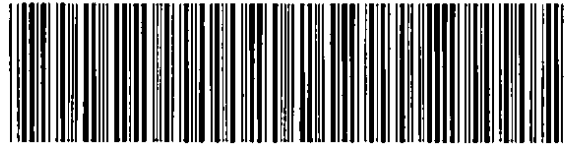
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2022 JUN -9 AM 9:46

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

2022 JUN -9 PM 1:52

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 10, 2022

LESBIA SEGURA  
3203 S ORANGE BLOSSOM TRAIL #206  
KISSIMMEE, FL 34746

SUBJECT: A RIVAS INVESTMENT INC  
Ref. Number: W22000077879

We have received your document for A RIVAS INVESTMENT INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L06000063601.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tammi Cline  
Regulatory Specialist II Supervisor

Letter Number: 522A00013045

FILED  
JUN 10 2022  
TALLAHASSEE, FL 32310

2022 JUN -9 PM 9:46

## COVER LETTER

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

SUBJECT: **A RIVAS INVESTMENT INC**

(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: **ANA RIVAS MARRERO**

Name (Printed or typed)

**3487 BOGGY CREEK ROAD**

Address

**KISSIMMEE, FL 34744**

City, State & Zip

**407-319-2891**

Daytime Telephone number

**ANARIVASREALTOR@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: ANA RIVAS INVESTMENT INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

3487 BOGGY CREEK ROAD  
KISSIMMEE, FL 34744

Mailing address, if different is:

3487 BOGGY CREEK ROAD  
KISSIMMEE, FL 34744

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: ANA RIVAS MARRERO, P

Address: 3487 BOGGY CREEK ROAD  
KISSIMMEE, FL 34744

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

CLERK OF STATE  
JUL 11 AM 9:47  
KISSIMMEE, FL 34744

2022 JUN -9 PM 9:47

FILED

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: LESBIA SEGURA  
Address: 3203 S ORANGE BLOSSOM TRAIL #206  
KISSIMMEE, FL 34746

**ARTICLE VII INCORPORATOR**

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

Name: LESBIA SEGURA  
Address: 3203 S ORANGE BLOSSOM TRAIL #206  
KISSIMMEE, FL 34746

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2022 JUN -9 AM 9:47  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

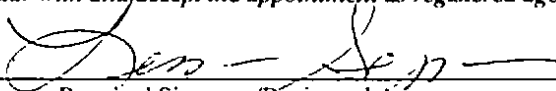
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: JUNE 9, 2022 (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.

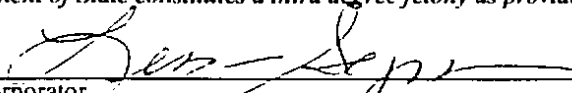
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
Required Signature/Registered Agent

6/9/2022

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.*

  
Required Signature/Incorporator

6/9/2022

Date