

8/30/22, 3:46 PM

Division of Corporations

P2200007718

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : ALEX PINA CO.
Account Number : 120190000095
Phone : (305)803-8471
Fax Number : (305)602-3977

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

Email Address: client@alexpina.co

**FLORIDA PROFIT/NON PROFIT CORPORATION
AKIRE INVESTMENTS CORP**

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

2022 AUG 30 PM 4:51

FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

22 AUG 30 PM 6:58

FILED

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: **AKIRE INVESTMENTS CORP**

ARTICLE II PRINCIPAL OFFICE

Principal street address Mailing address, if different is:
7242 NW 54th ST
MIAMI, FL 33166

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **Any And All Lawful Purposes**

ARTICLE IV SHARES

The number of shares of stock is: **10,000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Jonathan R Arias - President** Name and Title:

Address: **7242 NW 54th ST** Address:

MIAMI, FL 33166

Name and Title: Name and Title:

Address: Address:

Name and Title: Name and Title:

Address: Address:

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22 AUG 30 PM 6:59
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TALLAHASSEE, FLORIDA

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: Alex Pina Co.
 Address: 8400 NW 36th St Ste 450
Doral, FL 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jonathan R Arias
 Address: 7242 NW 54th ST
MIAMI, FL 33166

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

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

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 22 AUG 30 PM 5:58
 08/30/2022
 DATE
 08/30/2022