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Division of Corporations
Florida Department of State
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To:
Division of Corporations
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From:
Account Name : AT PLUS CORP
Account Number : I20140000060
Phone : (305)406-3800
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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2022 OCT 27 PM 4:15

**FLORIDA PROFIT/NON PROFIT CORPORATION
ANTHONYRG CORP**

Certificate of Status	0
Certified Copy	0
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Corporate Filing Menu


Help

AFFIDAVIT

BEFORE ME, the undersigned authority, on this day personally appeared **YUNIEL RODRIGUEZ GOMEZ**, who after being firstly duly sworn, under oath, deposes and says:

1. The undersigned is also the sole Director and the President of **ANTHONNYRG CORP**, a Florida corporation to be filed with the Florida Department of State on or about **October 25, 2022**.
2. The undersigned hereby consents to and authorizes the use by **ANTHONNYRG CORP**, of the name **ANTHONNYRG CORP**.
3. The undersigned has personal knowledge of the fact and matter set forth herein and therefore has no intentions of reinstating the dissolved entity.

FURTHER AFFIANT SAYETH NAUGHT.




YUNIEL RODRIGUEZ GOMEZ

OCT 27 11:31:17

STATE OF FLORIDA)
) SS:
 COUNTY OF MIAMI-DADE)

PERSONALLY appeared before me, **YUNIEL RODRIGUEZ GOMEZ**, who is personally known to me, who being by my first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

Witness my hand and official seal this 25 day of October 2022.



 Notary Public Signature

DAIANA AMADOR
 State of Florida - Notary Public
 Commission # HH 37154
 My Commission Expires Aug. 27, 2024

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: ANTHONYRG CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address
900 SW 84 Ave APT. 203
Miami FL 33144

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Yuniel Rodriguez Gomez (P)</u>	Name and Title:	_____
Address	<u>900 SW 84 Ave</u> <u>APT 203</u> <u>Miami FL 33144</u>	Address:	_____ _____ _____

Name and Title:	_____	Name and Title:	_____
Address	_____ _____ _____	Address:	_____ _____ _____

Name and Title:	_____	Name and Title:	_____
Address	_____ _____ _____	Address:	_____ _____ _____

2022 OCT 27 AM 3:17

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: Yuniel Rodriguez Gomez
 Address: 900 SW 84 Ave Apt 203
Miami FL 33144

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Yuniel Rodriguez Gomez
 Address: 900 SW 84 Ave Apt 203
Miami FL 33144

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

10/25/2022
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

10/25/2022
Date

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