

11/17/22, 10:44 AM

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Florida Department of State
Division of Corporations
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2022 Nov 17 PM 12:17

FLORIDA PROFIT/NON PROFIT CORPORATION MANFRED ECKER, P.A.

Certificate of Status	0
Certified Copy	1
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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: MANFRED ECKER, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

743 NW 9TH AVE

MIAMI, FL 33136

ARTICLE III PURPOSE

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

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MANFRED ECKER (P)

Name and Title: _____

Address 743 NW 9TH AVE

Address: _____

MIAMI, FL 33136

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

11-17-22 3:45

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: MANFRED ECKER

Address: 743 NW 9TH AVE
MIAMI, FL 33136

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MANFRED ECKER

Address: 743 NW 9TH AVE
MIAMI, FL 33136

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

EQ

11/7/2022

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.

EQ

11/7/2022

Required Signature/Incorporator

Date