

H23000058240
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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H230002752153ABC

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To:

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

From:

Account Name : TRAMILEX LLC
Account Number : 120150000086
Phone : (786)469-9163
Fax Number : (305)848-3716

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

Email Address: _____

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FLORIDA PROFIT/NON PROFIT CORPORATION

URENA URENT DENTAL C.A CORP

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OF
CORPORATIONS

2023 AUG -8 AM 9:07

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Corporate Filing Menu

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COVER LETTER

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

SUBJECT: URENA UREDENT DENTAL C.A CORP
(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

RENSO E. RUIZ LASTRA
FROM: RENSO E. RUIZ LASTRA Name (Deceased or Incompetent)

8350 NW 66th ST

Address

MIAMI, FL 33166

City, State & Zip

(786)559-1114

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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A230002152153

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: RENSO E. RUIZ LASTRA

Address: 8350 NW 66th ST

MIAMI, FL 33166
_____FILED
FLORIDA DEPARTMENT OF STATE
2023 AUG 8 AM 9:07**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: RENSO E. RUIZ LASTRA

Address: 8350 NW 66th ST

MIAMI, FL 33166
_____**ARTICLE VIII EFFECTIVE DATE:** 08/08/2023

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 business days prior or 90 business 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*

ZRC

08/08/2023

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.

ZAC

08/08/2023

Required Signature/Incorporator

Date

A230002152153