Division of Corporations Electronic Filing Cover Sheet

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.

(((H23000276761 3)))



230002767612ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

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

Email	Address:					

FLORIDA PROFIT/NON PROFIT CORPORATION ANNA TORO, P.A.

<(「ハモ・VED 3AUG-9 FM 4:23

 Certificate of Status
 0

 Certified Copy
 1

 Page Count
 03

 Estimated Charge
 \$78.75

Electronic Filing Menu Corporate Filing Menu Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

LEH = PR	<u>INCIPAL OFFICE</u>		
	Principal street address	Mailing	g address, if different is:
···			
WEST DR AP	T 326 NORTH BAY VILLAGE, FL 33141		
TEIII PUI rpose for whi	RPOSE ch the corporation is organized is:		
	siness is: Real Estate Associate		
nber of shares LE V INI	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS		
nber of shares LE V INI Name and T	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS itle: ANNA KARINA TORO SIMANCAS		·····
LE V INI	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS Title: ANNA KARINA TORO SIMANCAS 8000 WEST DR	(P) Name and Title:	
nber of shares LE V INI Name and T	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS Title: ANNA KARINA TORO SIMANCAS 8000 WEST DR APT 326	(P) Name and Title: Address:	
nber of shares LE V INI Name and T	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS Title: ANNA KARINA TORO SIMANCAS 8000 WEST DR	(P) Name and Title: Address:	
nber of shares LE V INI Name and T Address	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS TITLE: ANNA KARINA TORO SIMANCAS 8000 WEST DR APT 326 NORTH BAY VILLAGE, FL 3314	(P) Name and Title: Address:	
nber of shares LE V INI Name and T Address	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS Title: ANNA KARINA TORO SIMANCAS 8000 WEST DR APT 326	(P) Name and Title:Address:	
nber of shares LE V INI Name and T Address Name and Ti	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS Sitle: ANNA KARINA TORO SIMANCAS 8000 WEST DR APT 326 NORTH BAY VILLAGE, FL 3314	(P) Name and Title:Address:	
nber of shares LE V INI Name and T Address Name and Ti	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS Sitle: ANNA KARINA TORO SIMANCAS 8000 WEST DR APT 326 NORTH BAY VILLAGE, FL 3314	(P) Name and Title:Address:	202
nber of shares LE V INI Name and T Address Name and Ti	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS Sitle: ANNA KARINA TORO SIMANCAS 8000 WEST DR APT 326 NORTH BAY VILLAGE, FL 3314	(P) Name and Title:Address:	ZDZ3 AUG - S SECRETAL LABOR
nber of shares LE V INI Name and T Address Name and Ti	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS itle: ANNA KARINA TORO SIMANCAS 8000 WEST DR APT 326 NORTH BAY VILLAGE, FL 3314 tle:	(P) Name and Title: Address: Name and Title: Address:	2023 AUG -9 A SECRETARY OF TALLABASS
nber of shares LE V INI Name and T Address Name and Ti Address	of stock is: 100 FIAL OFFICERS AND/OR DIRECTORS itle: ANNA KARINA TORO SIMANCAS 8000 WEST DR APT 326 NORTH BAY VILLAGE, FL 3314 tle:	(P) Name and Title: Address: Name and Title: Address: Name and Title:	2023 AUG - 9 SECTION AND AND AND AND AND AND AND AND AND AN

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acce	cotable) of the registered agent is:
Name: ANNA KARINA TORO SIMAN	·
Address: 8000 WEST DR APT 326 NORT	——— ГН BAY VILLAGE, FL 33141
	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: ANNA KARINA TORO SIMA	ANCAS
Address: 8000 WEST DR APT 326 f	NORTH BAY VILLAGE. FL 33141
<u></u>	
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of illing:	(OPTIONAL)
(If an effective date is listed, the date must be specific ar filing.)	nd cannot be more than five days prior or 90 days after the
Note: If the date inserted in this block does not meet the apthe document's effective date on the Department of State's	pplicable statutory filing requirements, this date will not be listed as records.
Having been named as registered agent to accept service of j certificate, I am familiar with and accept the appointment a A 47	process for the above stated corporation at the place designated in this is registered agent and agree to act in this capacity
L. C. 200 1201 1011	
Required Signature/Registered A	gent Date 3
I submit this document and affirm that the facts stated he document to the Department of State constitutes a third deg	erein are true. I am aware that the false information submitted in a
1.97.	rece yearny as provinced you in start (1.15). (1.5).
Required Signature/Incorporator	Date SST
respired organism memperator	
	·