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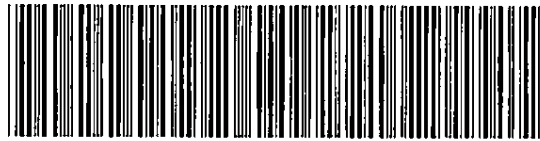
(Business Entity Name)

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2024

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Pigeon Trading Company Corp.

Please Debit FCA000000003 For: check

Thank you Seth Neeley



____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
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COVER LETTER

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

SUBJECT: PIGEON TRADING COMPANY 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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Alex D. Sirulnik, P.A.

Name (Printed or typed)

2199 Ponce de Leon Blvd, Suite 301.

Address

Coral Gables, Florida 33134

City, State & Zip

(305) 443-7211

Daytime Telephone number

ads@sirulniklaw.com

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

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

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: PIGEON TRADING COMPANY CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address
2199 Ponce de Leon Blvd, Suite 301.

Coral Gables, Florida 33134

Mailing address, if different is:

2199 Ponce de Leon Blvd, Suite 301.

Coral Gables, Florida 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Juan Ignacio Paderta, President

Name and Title: _____

Address 2199 Ponce de Leon Blvd, Suite 301.

Address: _____

Coral Gables, Florida 33134

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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 D. Sirulnik, P.A.
Address: 2199 Ponce de Leon Blvd, Suite 301.
Coral Gables, Florida 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Alex D. Sirulnik, P.A.
Address: 2199 Ponce de Leon Blvd, Suite 301.
Coral Gables, Florida 33134

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
1/23/24
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
1/23/24
Date

2024