

**P24000033022**

Florida Department of State  
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**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**JESUS ORESTES CERVANTES P.A. II**

Certificate of Status	0
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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: JESUS ORESTES CERVANTES P.A. II

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
8550 WEST FLAGLER STREET, SUITE 120  
MIAMI, FLORIDA 33144

Mailing address, if different is:

**ARTICLE III PURPOSES****ALL LEGAL PURPOSE**

The purpose for which the corporation is organized is: ALL LEGAL PURPOSES —

ATTORNEY

**ARTICLE IV SHARES**

The number of shares of stock is: 100 SHARES

: DIVIDED AS FOLLOWS:

JESUS ORESTES CERVANTES 100 SHARES

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: JESUS ORESTES CERVANTES, PRESIDENT, TREASURER, SECRETARY, AND DIRECTOR

8550 W. FLAGLER STREET, SUITE 120, MIAMI, FLORIDA 33144

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**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: JESUS ORESTES CERVANTES

Address: 8550 West Flagler Street, Suite 120  
Miami, Florida 33144

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: JESUS ORESTES CERVANTES  
8550 West Flagler Street, Suite 120  
Miami, Florida 33144

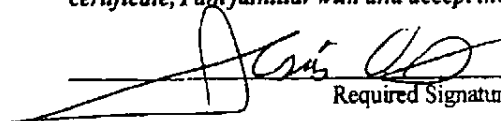
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: MAY 13, 2024. (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.)

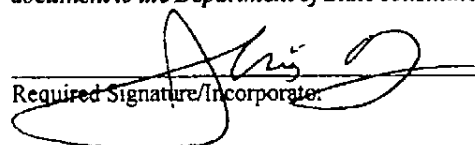
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

5/13/2024  
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/Incorporate:

5/13/2024  
Date

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