

PR4000408795

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : TAP SOLUTIONS INC
Account Number : I20210000103
Phone : (786)615-3057
Fax Number : (786)615-3058

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

Email Address: info@tapolution.net

RECEIVED
2024 JUN 13 PM 12: 54

**FLORIDA PROFIT/NON PROFIT CORPORATION
PEDRO MIGUEL D.M.D P.A**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

FILED
2024 JUN 13 PM 12: 17
STATE

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: PEDRO MIGUEL D.M.D P.A

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5550 S UNIVERSITY DR APT 7305

DAVIE, FL 33328

ARTICLE III PURPOSE

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

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES @ \$10.00 EACH

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MIGUEL CRUZ, PEDRO- P Name and Title:

Address 5550 S UNIVERSITY DR APT 7305 Address:

DAVIE, FL 33328

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

2024 JUN 13 PM 12:17
FBI-FLA

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: MIGUEL CRUZ, PEDRO
 Address: 5550 S UNIVERSITY DR APT 7305
DAVIE, FL 33328

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MIGUEL CRUZ, PEDRO
 Address: 5550 S UNIVERSITY DR APT 7305
DAVIE, FL 33328

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 TALLAHASSEE, FL

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

PEDRO MIGUEL CRUZ (Jun 13, 2024 10:35 EDT) 13/06/24
 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.

PEDRO MIGUEL CRUZ (Jun 13, 2024 10:35 EDT) 13/06/24
 Required Signature/Incorporator Date