## Paq 000 a Department is at a light of Corporations Electronic Filing Cover Sheet

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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 futur annual report mailings. Enter only one email address please.\*\*

Email Address: info@tapsolution.net

FLORIDA PROFIT/NON PROFIT CORPORATION CISPOLACADEMY CORP

2024 JUN 2 I AM 10: 5 I

Certificate of Status1Certified Copy0Page Count03Estimated 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)

name of the corpor	ation shall be: CISPOL ACA	DEMY CORP		
Principal <u>street</u> address		М	Mailing address, if different is:	
343 NW <i>7</i> TH STRE	ET			
MAMI, FL 33125				
RTICLE III PURF	<u>POSE</u>	AND ALL LANGERS OF	ICINECC ACTIVITY	
ne purpose for which	the corporation is organized is: ANY	AND ALL LAWFOL BO	January New York	
			- S	
			IM 2 ASS	
RTICLE IV SHA	<u>RES</u> of stock is: <u>100 SHARES @ \$10.00 EAC</u>	СН	E.C	
the number of Strates	of stock is.		SF S SF S	
RTICLE V INIT	IAL OFFICERS AND/OR DIRECTOR	<u>s</u>	77. <b>1: 3</b>	
Name and Ti	tie: FIDEL E. MEJIA VELEZ-P (7:	5%) Name and Title:	DANIELA A. MEJIA CARRANZATOP (12.5	
Address	2343 NW 7TH STREET	Address: _	2343 NW 7TH STREET	
	MIAMI, FL 33125	<u></u>	MIAMI, FL 33125	
Name and Tit	le: SKARLETH I, RENDON MONTIEL-T	(12.5%) Name and Title:		
Address	2343 NW 7TH STREET	Address:		
	MIAMI, FL 33125			
Name and Tit	ile:	Name and Title:		
Address		Address:		
Address		Address:		

Хапкс ави	d Title:	Name and Title:	
Address		Address: ·	
	REGISTERED AGENT orldn afreet address (P.O. Box NOT accepta	thle) of the resistence amounts:	
Name:	PUBL E. MEJIA VELEZ		
Address:	2343 NW 7TH STREET		
	MIAMI, FL 33125		
article vii	INCORPORATOR		
Тъс павъе инд до	ldress of the incorporator is:		
Name:	FIDEL E. MINIA VELEZ	÷	
Address:	2343 NW TTH STREET		
	MIAM), FL 33128		
Effective data, if (If an effective d filing.)	ate is listed, the date must be specific and		rior or 90 days after the
Note: If the date the document's c	inserted in this block does not meet the app flective date on the Department of State's re-	ficulte statutory liling requirement cords.	s, this date will not be listed as
Having been nan certificate, I am f	sed as registered fremen geven service of pr aniliar with and appear for appointment as	ocess for the above stated corporati registered agent and agree to act in	on at the place designated in this this capacity
	1		20/06/2024
	Required Agriculture Registered Age	III.	Date
I submit this doc document to the i	cument and affirm that the facts stated here Department of Spite constitutes a third degre	rin are true. I am aware that the f e felony as poovided for in s.817.15	Calse information submitted in a
	/		20/06/2024
Required Signatu	ie/incorporator	1)	ate