

P24000050040

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
CORPORATION

FLORIDA PROFIT/NON PROFIT CORPORATION FRANCISCO CAMPOS, P.A.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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STATE

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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: FRANCISCO CAMPOS, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1625 NW 20TH ST, #247
MIAMI, FL 33142

Mailing address, if different is:
1625 NW 20TH ST, #247
MIAMI, FL 33142

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE.

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: FRANCISCO CAMPOS / P.S.T.
Address: 1625 NW 20TH ST, #247
MIAMI, FL 33142

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

2024 AUG -1 17:29:40
STATE OF FLORIDA
CORPORATION DIVISION

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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: FRANCISCO CAMPOS
 Address: 1625 NW 20TH ST, #247
MIAMI, FL 33142

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: FRANCISCO CAMPOS
 Address: 1625 NW 20TH ST, #247
MIAMI, FL 33142

2024 AUG -1 AM 11:45
 STATE

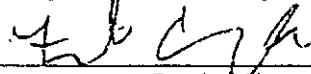
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

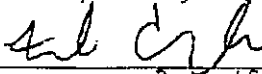
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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

 08/01/2024
 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.

 08/01/2024
 Required Signature/Incorporator Date

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