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Florida Department of State
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FLORIDA PROFIT/NON PROFIT CORPORATION

BRAVO ASSETS & MANAGEMENT INC

Certificate of Status	0
Certified Copy	1
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Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: BRAVO ASSETS & MANAGEMENT INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

8150 SW 72ND AVEMIAMI, FL 33143

The number:

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 100 SHARES**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: OCTAVIO ALEXIS BRAVO - P

Name and Title:

Address 8150 SW 72ND AVE

Address:

MIAMI, FL 33143

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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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:

Effective _____
 Name: OCTAVIO ALEXIS BRAVO
 Address: 8150 SW 72ND AVE
 MIAMI, FL 33143

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: OCTAVIO ALEXIS BRAVO
 Address: 8150 SW 72ND AVE
 MIAMI, FL 33143

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
 11-18-2024
 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/Incorporator
 11-18-2024
 Date

ARTICLE IX

The purpose