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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : DMG FINANCIAL SERVICES INC  
Account Number : I20230000151  
Phone : (305)595-2407  
Fax Number : (305)595-2408

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

Email Address: \_\_\_\_\_

FLORIDA PROFIT/NON PROFIT CORPORATION  
FERRO INSURANCE INC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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Corporate Filing Menu

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SECRETARY OF STATE  
TALLAHASSEE, FL

**COVER LETTER**

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** FERRO INSURANCE INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

FROM: MARIA E RUIZ  
Name (Printed or typed)  
7750 SW 117TH AVE SUITE 203  
Address  
MIAMI FLORIDA 33183  
City, State & Zip  
305 595-2407  
Daytime Telephone number  
MARIAQUIROS9@HOTMAIL.COM  
E-mail address: (to be used for future annual report notification)

**NOTE:** Please provide the original and one copy of the articles.

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

The name of the corporation shall be:

Principal street address

Mailing address, if different is:

9382 SW 169TH STREET

PALMETTO BAY, FLORIDA 33157

ANY AND LEGAL BUSINESS

The purpose for which the corporation is organized is:

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SECRETARY OF STATE  
TALLAHASSEE, FL.

**ARTICLE IV SHARES** 100  
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: YENEISY FERRO RUIZ, PRES

**Name and Title:**

Address 9382 SW 169TH STREET

Address:

PALMETTO BAY, FLORIDA 33157

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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: YENEISY FERRO RUIZ

Address: 9382 SW 169TH STREET

PALMETTO BAY, FLORIDA 33157

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: YENEISY FERRO RUIZ

Address: 9382 SW 169TH STREET

PALMETTO BAY, FLORIDA 33157

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 12/13/2024 (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*

<u>X</u> <u>[Signature]</u>	<u>12/11/2024</u>
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.*

<u>X</u> <u>[Signature]</u>	<u>12/11/2024</u>
Required Signature/Incorporator	Date

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 TALLAHASSEE, FL