

P97000072653

BEST QUICK TAX RETURNS
310 S. BUMBY ORLANDO, FL 32803

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Corali Enterprises PA (Corporation Name) 000002268110--0 (Document #)
-08/15/97--01037--011
*****70.00 *****70.00
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

☐ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
97 AUG 21 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

437,630,3551,3550
W/97-18925

Examiner's Initials

Pablo Rodriguez

310 $\frac{1}{2}$ S. Bumby

ORLANDO FL

32803

Telephone - 407-896-7921 10-5 M-F



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

August 15, 1997

BEST QUICK TAX RETURNS
310 S. BUMBY
ORLANDO, FL 32803

SUBJECT: CORALI FUENTES PA
Ref. Number: W97000018925

We have received your document for CORALI FUENTES PA and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6972.

Doris Brown
Document Specialist

Letter Number: 597A00041498

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

CORALI FUENTES PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5487 NOKOMIS COURT
ORLANDO, FL 32839

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 shares common stock-no par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CORALI FUENTES
5487 NOKOMIS COURT
ORLANDO, FL 32839

ARTICLE V INCORPORATORS

The name and street address of the incorporator to these Articles of Incorporation is:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pablo Rodriguez, CPA
310 1/2 S. Bumby
Orlando, FL 32803

ARTICLE VI DIRECTORS

The company will be run by the board of directors. The directors are:

CORALI FUENTES
MARK T GRECNI

ARTICLE VII OFFICERS

CORALI FUENTES-PRESIDENT
MARK T GRECNI-VICE PRESIDENT
CORALI FUENTES-TREASURER

ARTICLE IX NATURE OF BUSINESS

The Corporation will engage in the business of sale of real estate and time shares.

The undersigned Incorporator has executed these Articles of Incorporation this 12 day of August 1997.



signature

Address for:
CORALI FUENTES
5487 NOKOMIS COURT
ORLANDO, FLO 32839

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: CORALI FUENTES PA
2. The name and address of the registered agent and office is:

CORALI FUENTES
(NAME)

5487 NOKOMIS COURT
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

ORLANDO FL 32839
(CITY/STATE/ZIP)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

X Coral Fuentes
(SIGNATURE)

8/12/97
(DATE)