

P97000094992

TRANSMITTAL LETTER

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

800002338468--0
-11/05/97--01028--005
*****78.75 *****78.75

SUBJECT: ESPINOSA and ASSOCIATES INC.
(Proposed corporate name - must include suffix)

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: VENANCIO E. ESPINOSA
Name (Printed or typed)

6010 NW 201 Lane
Address

MIAMI FL 33015
City, State & Zip

306-620-5969
Daytime Telephone number

FILED
97 NOV -5 PM 3:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B/S
11/5/97

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

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

The name of the corporation shall be:
Espinosa & Associates Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
6010 NW 201 Lane, Miami, FL. 33015.

ARTICLE III SHARES


The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
One hundred (100)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:
Venancio E. Espinosa,
6010 NW 201 Lane, Miami, FL. 33015.

ARTICLE V INCORPORATOR


The name and address of the incorporator of these Articles of Incorporation are:
Venancio E. Espinosa,
6010 NW 201 Lane, Miami, FL. 33015.



Signature/Incorporator

Date: November 3, 1997

Having been named as a 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.



Signature/Registered Agent

Date: November 3, 1997

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA