

P19000008634

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

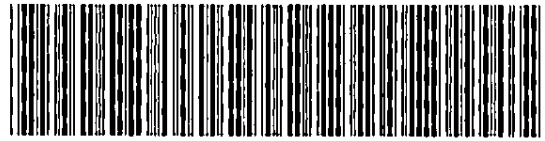
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 JAN 30 PM 1:54
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TALLAHASSEE, FLORIDA

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STATE OF FLORIDA
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JAN 31 2019

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COVER LETTER

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

SUBJECT: INVER HOLDINGS 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
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: JENNIFER C. RUZ

Name (Printed or typed)

7355 SW 87TH AVENUE, SUITE 200

Address

MIAMI, FL 33173

City, State & Zip

305-921-9326

Daytime Telephone number

JRUZ@RUZLAW.COM

E-mail address: (to be used for future annual report notification)

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

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: INVER HOLDINGS CORP.

ARTICLE II PRINCIPAL OFFICE
Principal street address: 121 ALHAMBRA PLAZA
SUITE 1209
CORAL GABLES, FL 33134
Mailing address, if different is: _____

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Any and all lawful business.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

| | | | |
|-----------------|---|-----------------|-------------------------|
| Name and Title: | <u>RICHARD VALDES, P/D</u> | Name and Title: | _____ |
| Address | <u>121 ALHAMBRA PLAZA</u> <u>SUITE 1209</u> <u>CORAL GABLES, FL 33134</u> | Address: | _____ _____ _____ |

| | | | |
|-----------------|----------------|-----------------|----------------|
| Name and Title: | _____ | Name and Title: | _____ |
| Address | _____ _____ | Address: | _____ _____ |

| | | | |
|-----------------|----------------|-----------------|----------------|
| Name and Title: | _____ | Name and Title: | _____ |
| Address | _____ _____ | Address: | _____ _____ |

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TALLAHASSEE, FLORIDA

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: RUZ & RUZ PL
Address: 7355 SW 87TH AVENUE, STE 200
MIAMI, FL 33173

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RUZ & RUZ PL
Address: 7355 SW 87TH AVENUE, STE 200
MIAMI, FL 33173

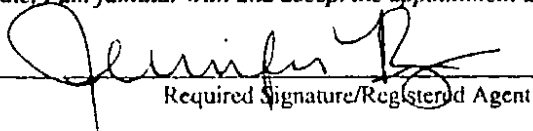
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/25/2019 (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.)

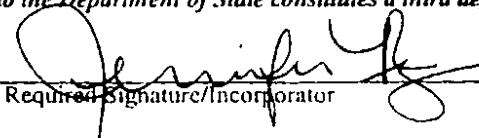
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

01/30/2019
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

01/30/2019
Date