

P25000004726
 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

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**FLORIDA PROFIT/NON PROFIT CORPORATION
 FOUREM 14, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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Corporate Filing Menu

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 SEC. OF STATE
 TALLAHASSEE, FL

AS

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: Fourem 14, Inc.

ARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is:

9610 SW 65 Street
Miami, FL 33173

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: shares: 100 @ \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Marlene M. Suarez - P Name and Title: _____

Address 9610 SW 65 Street Address: _____

Miami, FL 33173 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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TALLAHASSEE, FL

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Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Marlene M. Suarez
 Address: 9610 SW 65 Street
Miami, FL 33173

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ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Marlene M. Suarez
 Address: 9610 SW 65 Street
Miami, FL 33173

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

01/27/2025
 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

01/27/2025
 Date