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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 AUG 29 PM 1:55

Ps 8/30/11

COVER LETTER

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

SUBJECT: CHOKY'S SERVICES 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: CHOKY'S SERVICES INC.

Name (Printed or typed)

15660 SW 82 CIRCLE LANE APT 69

Address

MIAMI FLORIDA 33193

City, State & Zip

786-478-5647

Daytime Telephone number

portuondo_m@yahoo.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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME CHOKY'S SERVICES INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
15660 SW 82 CIRCLE LANE APT 69
MIAMI FLORIDA 33193

11 AUG 29 PM 1:55
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: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	MARIO JORGE PORTUONDO	Name and Title:	PRESIDENT
Address:	15660 SW 82 CIRCLE LANE APT 69 MIAMI FLORIDA 33193	Address:	

Name and Title:	MARIA E. DE LA TORRE	Name and Title:	VICE PRESIDENT
Address:	15660 SW 82 CIRCLE LANE APT 69 MIAMI FLORIDA 33193	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:

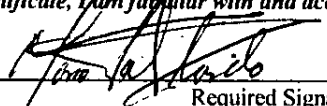
Name: MARIO JORGE PORTUONDO
Address: 15660 SW 82 CIRCLE LANE APT 69
MIAMI FLORIDA 33193

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


Name: MARIA E. DE LA TORRE
Address: 15660 SW 82 CIRCLE LANE APT 69
MIAMI FLORIDA 33193

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

08/24/2011
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

08/24/2011
Date