

P21000068870

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

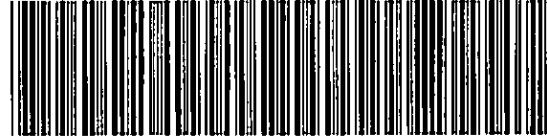
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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21 JUL 13 PM 8:33
SPECIAL AGENT IN CHARGE
TALLAHASSEE, FLORIDA

SB
7.29.21



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 14, 2021

DQYQNERO MQRTINEZ
1910 LAKE WORTH RD STE C
LAKE WORTH, FL 33461

SUBJECT: DEL PUEBLO MULTI-SERVICES CORP 2
Ref. Number: W21000100390

2021 JUL 26 PM 2:32

We have received your document for DEL PUEBLO MULTI-SERVICES CORP 2 and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete principal office address.

It appears the filing submitted has a typographical error in the entity name. Please verify this name and all other information contained in the filing and resubmit it for processing.

It appears that the word in the name of this entity is misspelled. If this misspelling was intentional, simply resubmit the document with the word spelled . If you did not misspell this word intentionally, please correct the spelling to read , and resubmit the document for processing.

SUFFIX NEEDS TO BE INSIDE CORP NAME > CAN NOT READ DOC.,

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STATE OF FLORIDA
TALLAHASSEE

FILED

Please return 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) 245-6052.

Shareta Backey
Regulatory Specialist II

Letter Number: 621A00016174

COVER LETTER

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

SUBJECT: DEL PUEBLO MULTI-SERVICES #2, CORP.
(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: DAYANARA S. MARTINEZ
Name (Printed or typed)

6128 S. CONGRESS AVE, SUITE C,
Address

LANTANA, FL. 33462
City, State & Zip

561-448-7500
Daytime Telephone number

delpuebloms@gmail.com
E-mail address: (to be used for future annual report notification)

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

21 JUL 13 PM 6:33
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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: DEL PUEBLO MULTI-SERVICES #2, CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address
6128 S. CONGRESS AVE.
SUITE C.
LANTANA, FL. 33462

Mailing address, if different is:
6128 S. CONGRESS AVE.
SUITE C.
LANTANA, FL. 33462

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:	<u>CARLOS R. MEJIA (P)</u>	Name and Title:	<u>DAYANARA S. MARTINEZ (VP)</u>
Address	<u>6128 S. CONGRESS AVE.</u>	Address	<u>6128 S. CONGRESS AVE.</u>
	<u>SUITE C.</u>		<u>SUITE C.</u>
	<u>LANTANA, FL. 33462</u>		<u>LANTANA, FL. 33462</u>

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

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

21 JUL 13 PM 8:33
SECRETARY
FILED

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: DAYANARA S. MARTINEZ

Address: 1910 LAKE WORTH RD, SUITE C,

LAKE WORTH, FL. 33461

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: DAYANARA S. MARTINEZ

Address: 1910 LAKE WORTH RD, SUITE C,

LAKE WORTH, FL. 33461

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 07/07/2021 (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

07/07/2021
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

Date

07/07/2021
Date
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