

PO9000020068

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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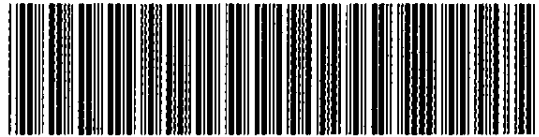
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: X-HMPCS ENTERPRISE 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: SANDRA C PEREZ

Name (Printed or typed)

19750 N.W. 57th PLACE

Address

MIAMI LAKES, FL 33015

City, State & Zip

305-343-3437

Daytime Telephone number

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:

X-HMPCS ENTERPRISE INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

19750 N.W. 57th PLACE MIAMI LAKES, FL 33015

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SERVICE

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

SANDRA C PEREZ 19750 N.W. 57th PLACE MIAMI LAKES, FL 33015 - PRESIDENT - ANDRE CARMENT 19750 N.W. 57th PLACE MIAMI LAKES, FL 33015 - VICE PRESIDENT

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

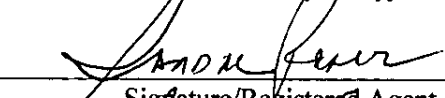
SANDRA C PEREZ 19750 N.W. 57th PLACE MIAMI LAKES, FL 33015

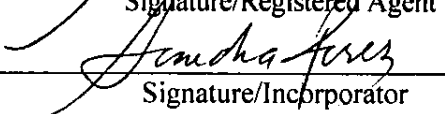
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

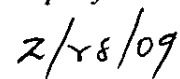
SANDRA C PEREZ 19750 N.W. 57th PLACE MIAMI LAKES, FL 33015

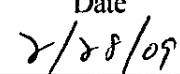
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent


Signature/Incorporator



Date


Date