## P13000661900

(Requestor's Name)				
(Address)				
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PICK-UP	☐ WAIT	MAIL		
(B <sub>1</sub>	usiness Entity Nar	me)		
(Document Number)				
Certified Copies	Certificates	s of Status		
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SECRETARY OF STATE DIVISION OF SORPERAISEN

7/25



## **COVER LETTER**

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

subject: <u>NU-</u>	•	servation Servi	ices, Inc.
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	Yunelis Du	(2) e (Printed or typed)	

Name (Printed or typed)

7103 Kingston Dr

Address

City, State & Zip

(813) 789-1527

Daytime Telephone number

N12UPROPERTY ADL. WM

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 NAM The name of the corporat	ion shall be: NU-2-U Prop	erty Prese	ervation Serv	/Ices	i, In
ARTICLE II PRII	NCIPAL OFFICE		Mailing address, if differen		,
	Principal street address	r	vianing address, if differen	,	
	ston Dr.				
lampa, t	L 33619		<u> </u>		
ARTICLE III PURI	POSE	nenate	evolusively		
The purpose for which the	ne corporation is organized is:	phorage of	AUDIVUY	1	<del></del>
_ 1	ving forclosed	numes 10	its origin	icu	
Clean st	ate.				•
~			•		
			مستدان والمستوالية		
		,	<u> </u>		
ARTICLE IV SHA	RES				elvi S
The number of shares of	stock is: 1000			ىب چىچ	SEC SE
ARTICLE V INIT	TAL OFFICERS AND/OR DIREC	CTORS	<del>,</del>	3 JUL 22	95
	YUNELIS DIAZ-OW		•	·70	
•	7103 Kingston Dr	Address:	•	<b>X</b>	TO TO
Address				<del></del>	
	Tampa, FL 33619	<u> </u>		ধা	
	`	·		•	
Name and Title		Name and Title			
Address		Address:			
	·		· · · · · · · · · · · · · · · · · · ·		<del></del> ,
		<del></del>			
Name and Title	•	Nome and Title			
	<u> </u>				
Address		Address:			
			<del></del>		

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:
Name: Yurelis Diaz	
77-011	
Address: 103 KINGSTON DR	<del></del>
lampa FL 33619	<del></del>
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: Yunelis Diaz	
Address: 703 KINGSTON D	02
Tano El 33619	<del></del>
TOTAL TE SSET	<del></del>
Having been named as registered agent to accept service of pro-	cess for the above stated corporation at the place designated in
this certificate, I am familiar with and accept the appointment as	
	7/10/13
Required Signature/Registered Agent	
I submit this document and affirm that the facts stated herein document to the Department of State constitutes a third degree for	are true. 1 am aware that the jaise information submitted in a elony as provided for in s.817.155. F.S. 1
	7)12/1-
Required Signature/Incorporator	• Date

SECRETARY OF STATE ON WIS 13 HI 22 PM WIS