

F 19000000382

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

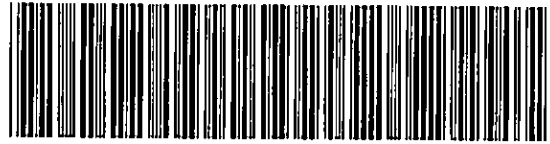
Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*- Cert too old  
w/19-110784*

Office Use Only



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SECRETARY OF STATE  
MAIL ROOM  
1000 BANKERS BUILDING  
INDIANAPOLIS, IN 46204-0001

2019 JAN 17 PM 4:27

FILED

M. MILLIGAN

JAN 22 2019



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 27, 2018

LUIS MONTOYA  
SERVIPRO, INC.  
19410 E LAKE DR.  
HIALEAH, FL 33015

SUBJECT: SERVIPRO INC.  
Ref. Number: W18000110284

We have received your document for SERVIPRO INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

If you have any questions concerning the filing of your document, please call (805) 245-6000.

Brenda L Vorisek  
Director

Letter Number: 818A00026441

**RECEIVED**  
JAN 17 2019

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SERVIPRO, INC

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

LUIS MONTOYA

Name of Person

SERVIPRO, INC

Firm/Company

19410 E LAKE DR.

Address

HALEAH, FL 33015

City/State and Zip code

LM@SERVIPROINC.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LUIS MONTOYA

Name of Person

at ( 786 ) 260-9669

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. SERVIPRO, INC  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE 3. 82-1479001  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 04/17/2017 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 19410 E LAKE DR. HIALEAH, FL 33015  
(Principal office address)

LM@SERVIPROINC.COM  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

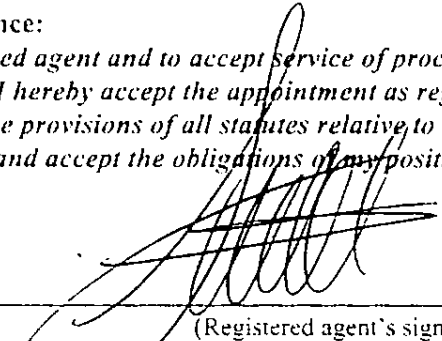
Name: LUIS MONTOYA

Office Address: 19410 E LAKE DR.

HIALEAH, Florida 33015  
(City) (Zip code)

9. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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2019 JAN 17 PM 4:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: ANGELA E. GIRALDO

Address: 19410 E LAKE DR. HIALEAH, FL 33015

Vice President: LUIS G. MONTOYA

Address: 19410 E LAKE DR. HIALEAH, FL 33015

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. \_\_\_\_\_

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. LUIS G. MONTOYA

(Typed or printed name and capacity of person signing application)

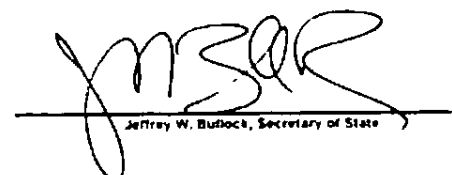
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2019 JAN 17 PM 4:21  
CLERK OF DISTRICT COURT  
JAN 17 2019

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "SERVIPRO INC." IS DULY INCORPORATED  
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND  
HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS  
OFFICE SHOW, AS OF THE SEVENTH DAY OF JANUARY, A.D. 2019.



Jeffrey W. Bullock, Secretary of State

6382540 8300

SR# 20190095604

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 202034508

Date: 01-07-19