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TRANSMITTAL LETTER

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

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-03/08/00--01056--020
*****78.75 *****78.75

SUBJECT: FLORIDA SERVICEWORKS, INC.
(Proposed corporate name - must include suffix)

FILED
00 MAR -8 AM 11:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enclosed is 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: EDUARDO E. ROJAS
Name (Printed or typed)

P.O. BOX 770636
Address

ORLANDO, FL. 32837
City, State & Zip

(407) 859-3086
Daytime Telephone number

Eduardo Rojas GAVE
AUTHORIZATION BY PHONE TO
CORRECT CORP. NAME
DATE 03-14-00
DOC. EXAM gy

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

W-6844
gjk
3/12

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

FLORIDA SERVICEWORKS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

P.O. BOX 770636
ORLANDO, FL. 32877

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One hundred (100) shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Eduardo E. Rojas
12616 Comino Ct.
Orlando, FL. 32837

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Eduardo E. Rojas
12616 Comino Ct.
Orlando, FL. 32837



Signature/Incorporator

3/6/2000

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent



Signature/Registered Agent

3/6/2000

Date

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TALLAHASSEE, FLORIDA