

P03000034907

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

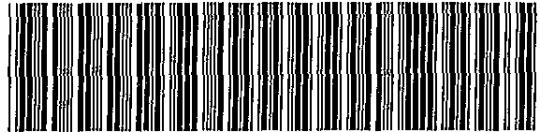
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/13/03--01024--022 **78.75

FILED
03 MAR 27 PM 3:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2003-2827

03/22

TRANSMITTAL LETTER

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

SUBJECT: Multiservices Agency
(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: Barbara Ricco
Name (Printed or typed)
14806 NE 6 Ave
Address
Miami FL 33161
City, State & Zip
305-940-6776
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 18, 2003

BARBARA RICO
14806 N E 6TH AVENUE
MIAMI, FL 33161

SUBJECT: MULTISERVICES AGENCY
Ref. Number: W03000007827

We have received your document for MULTISERVICES AGENCY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

You must list at least one incorporator with a complete business street address.

Please return the original and one copy of 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) 245-6972.

Doris Brown
Document Specialist
New Filings Section

Letter Number: 403A00016754

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 MAR 27 PM 1:33

RECEIVED

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

03 MAR 27 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Multiservices Agency Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

14806 NE 6 Ave Miami Fl 33161

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Insurance.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Barbara Rico. President + Gladys Rico Vice
1206 SW 143 PL 1206 SW 142 Ct President
Miami Fl 33184. Miami Fl 33184

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Lourdes Hernandez. Agent
2458 W 65 St
Hialeah Fl 33013.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Barbara Rico
14806 NE 6 Ave
Miami Fl 33161.

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

Barbara Rico

Signature/Incorporator

Date

3/10/03

Date

3/10/03