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TRANSMITTAL LETTER

MIAMI FUNCTAL SERVICES TOTE.

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

SUBJECT:	(PROPOSED CORPORATI	E NAME – MUST INCLUDI	SUFFIX
Enclosed is an origin \$70.00 Filing Fee	al and one(1) copy of the article \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status

FROM:

MS. Zabida Hasini

Name (Printed or typed)

6871 Sw Hoth Street

Address

MIAM, 12. 3355

City, State & Zip

Daytime Telephone number

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I The name of the corporation shall be: MIAMI FUNERAL SERVICES, TNC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 6871 SW YOUR STREET MIAMI FE. 33155 ARTICLE III PURPOSE The purpose for which the corporation is organized is: FUNERAL SERVICES ARTICLE IV SHARES

The number of shares of stock is:

100

		•
ARTICLE	V	INITIAL OFFICERS/DIRECTORS (optional)

6871 SW York Street MIAMI, FZ. 33155 CLEVI The name(s), address(es) and title(s):

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

MS. ZABIDA Mimi

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

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/Incorporator