

P03000086067

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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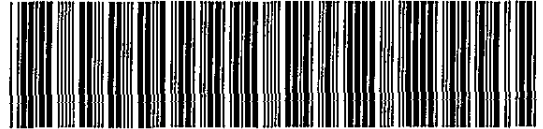
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓

8/8/1

TRANSMITTAL LETTER

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

SUBJECT: MAURICIO Systems, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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:

MAURICIO BAZOALTO
Name (Printed or typed)

132 SANTA CLARA DRIVE, Apt. 2
Address

Naples, FL. 34104
City, State & Zip

(239) 289-3574
Daytime Telephone number

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 NAME

The name of the corporation shall be:

MAURICIO Systems, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*132 SANTA CLARA DRIVE, Apt. #2
Naples, FL, 34104*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is:

1000 shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

*MAURICIO BAZOALTO
132 SANTA CLARA DRIVE
Apt #2
Naples, FL 34104
President*

*Beatriz SUAREZ
132 Santa CLARA DRIVE
Apt #2
Naples, FL, 34104
Secretary-Treasurer*

ARTICLE VI REGISTERED AGENT

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

*MAURICIO BAZOALTO
132 SANTA CLARA DRIVE
Apt #2
Naples, FL 34104*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*MAURICIO BAZOALTO
132 SANTA CLARA DRIVE
Apt #2
Naples, FL, 34104*

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

X *[Signature]*
Signature/Registered Agent

8-4-03
Date

X *[Signature]*
Signature/Incorporator

8-4-03
Date

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03 AUG -4 PM 2:47
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TALLAHASSEE, FLORIDA