

P03000098490

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

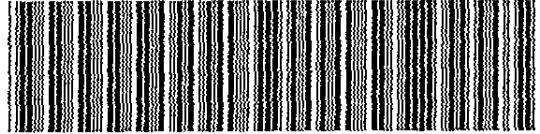
(Business Entity Name)

(Document Number)

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2003 SEP -3 AM 2:27
SECOND JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

09-09-03

TRANSMITTAL LETTER

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

SUBJECT: Rhino PC Parts & Repair Company

(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

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

ADDITIONAL COPY REQUIRED

FROM: Carlos Areces

Name (Printed or typed)

2451 Brickell Ave, Suite 9L

Address

Miami, FL 33129

City, State & Zip

(305) 970-4645

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:

Rhino PC Parts & Repair Company

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2451 Brickell Ave, Suite 9L, Miami, FL 33129

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Computer service, repair and parts retail

ARTICLE IV SHARES

The number of shares of stock is:

1,000 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Carlos Areces, President, 2451 Brickell Ave, Suite 9L, Miami, FL 33129

ARTICLE VI REGISTERED AGENT

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


Carlos Areces 2451 Brickell Ave, Suite 9L, Miami, FL 33129

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Carlos Areces 2451 Brickell Ave, Suite 9L, Miami, FL 33129

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



Signature/Incorporator



Date



Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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