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Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone: (305)634-3694

Fax Number : (305)634-3694

FLORIDA PROFIT CORPORATION OR P.A.

la escoba services, inc.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 1       |
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# ARTICLES OF INCORPORATION OF LA ESCOBA SERVICES, INC.

The undersigned subscribers to these articles of incorporation hereby associate themselves together to form a corporation under the laws of the State of Florida.

#### **ARTICLE I**

#### NAME

The name of this corporation is LA ESCOBA SERVICES, INC.

#### ARTICLE II

#### GENERAL NATURE OF BUSINESS

The corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

#### ARTICLE III

#### CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock having a nominal or par value of One (\$1.00) Dollar per share. All said shares shall be payable in cash, property, labor or services at a valuation to be fixed by the Board of Directors at a meeting called for that purpose. Property, labor or services may be purchased or paid for with capital stock at a just valuation to be fixed by the Board of Directors.

#### **ARTICLE IV**

#### INITIAL CAPITAL

The amount of capital with which this corporation will begin business is not less than \$100.00.

#### ARTICLE V

#### TERM OF EXISTENCE

This corporation is to exist perpetually.

SECRETARY OF STATES TALLARY SSEE, FLOTION OF T

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#### ARTICLE VI

#### **ADDRESS**

The initial office address of the principal office of this corporation in the State of Florida is c/o Don Gonzalez, P.A. 1820 N Corp. Lakes Blvd, Ste 201, Weston, FL 33326. The Board of Directors may from time to time move the principal office to another address in Florida.

#### ARTICLE VII

#### DIRECTORS

This corporation shall have not less than one director; however, the number of directors may be increased or diminished from time to time by By-laws adopted by the stockholders, but shall never be less than one.

#### ARTICLE VIII

#### INITIAL DIRECTORS AND OFFICERS

The names and post office addresses of the members of the first Board of Directors and the initial corporate officers is:

| Office                   | Name           | Address  |
|--------------------------|----------------|--|
| President/Treasurer      | GUSTAVO ABELLO | c/o Don Gonzalez, P.A.<br>1820 N. Corp. Lakes Blvd<br>Suite #201<br>Weston, Fl 33326 |
| VicePresident/ Secretary | maria muñoz    | c/o Don Gonzalez, P.A.<br>1820 N. Corp. Lakes Blvd<br>Suite #201<br>Weston, Fl 33326 |

#### ARTICLE IX

#### <u>AMENDMENTS</u>

These articles of incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the Stockholders, and approved at a stockholders' meeting by two thirds of the stock entitled

to vote thereon, unless all the directors and all the stockholders sign a written statement manifesting their intention that a certain amendment of these articles of incorporation made.

#### ARTICLE X

#### REGISTERED OFFICE AND REGISTERED AGENT

That LA ESCOBA SERVICES, INC., desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Incorporation at the City of Weston, County of Broward, State of Florida, hereby designates Don-Gonzalez, P.A., as registered agent, to accept services within the State. The registered office of the corporation shall be 1820 N. Corp. Lakes Blvd. Ste #201, Weston, Fl 33326.

#### ARTICLE XII

#### INCORPORATOR

The name and street address of the incorporator is:

NAME

**ADDRESS** 

Don Gonzalez, Esq.

1820 N. Corp. Lakes Blvd., Suite 201 Weston, Florida 33326

WITNESS the hand and seal of the incorporator in Broward County, State of Florida, this 12 day of February 2004.

Don Convaler Hea

STATE OF FLORIDA )
) S.S.
COUNTY OF BROWARD)

I HEREBY CERTIFY that on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments, that Don Gonzalez, who is personally known to me/who presented the following identification  $+ \ell$ , and who executed the foregoing instrument and he acknowledged before me that he executed the same.

WITNESS my hand and seal at, Broward County, Florida this 15 day of February 2004.

Notary Public

REGISIO A MILANO
Notary Public - State of Florida
MyCommission & 00234737
Commission & 00234737
floridad by Notional Notary Aug.
My Commission Expires

#### CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

· In compliance with Section 48.09l, Florida Statutes, the following is submitted:

FIRST: That LA ESCOBA SERVICES, INC., desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the City of Weston, State of Florida, has named Don Gonzalez, P.A. as its Agent to accept service of process within Florida.

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Date: February 13, 2004.

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### CERTIFICATE OF DESIGNATION REGISTERED OFFICE/REGISTERED AGENT

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the corporation is LA ESCOBA SERVICES, INC.
- 2. The name and address of the registered agent and office is:

Don Gonzalez, P.A. 1820 N. Corp. Lakes Blvd., #201 Weston, FL 33326 (954) 598-0660

Date: February 13, , 2004

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.

Date: February 😤 2004

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