

(Requestor's Name)

(Address)

{Address}

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

MAIL

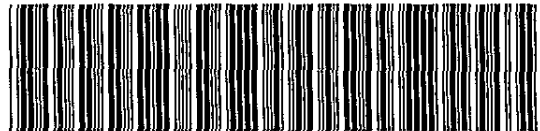
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/19/04--01033--013 **87.50

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04 MAR 19 PM 2:53
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Four Stars Inspections, Inc.
(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: Rafael Rivero
Name (Printed or typed)

5960 SW 5th Terrace
Address

Miami, FL 33144
City, State & Zip

305-267-9806
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)

FILED

ARTICLE I NAME

The name of the corporation shall be:

Four Stars Inspections, Inc.

04 MAR 19 PM 2:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5960 SW 5th Terrace
Miami, Fl. 33144

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to engage in any activity or business permitted
under the laws of the United States and state of Florida

ARTICLE IV SHARES

The number of shares of stock is:

100 shares of one dollar (\$1.00) par value
common stock, which shall be designated "Common shares."

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Rafael Rivero, President
5960 SW 5th Terrace
Miami, Fl. 33144

ARTICLE VI REGISTERED AGENT

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

Rafael Rivero
5960 SW 5th Terrace
Miami, Fl. 33144

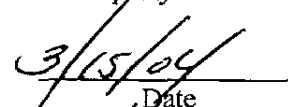
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Rafael Rivero
5960 SW 5th Terrace
Miami, Fl. 33144

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


Date


Signature/Incorporator


Date