

**P0400007372**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

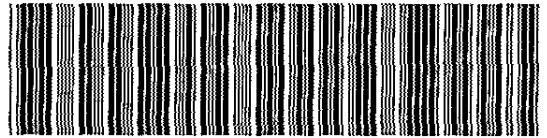
(Document Number)

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2004 MAY -5 P 3:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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STATE  
REGISTRARS  
FLORIDA

EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101

Address

CORAL GABLES, FL 33134

City/State/Zip

(305) 444-4994

Phone #

OFFICE USE ONLY

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. Florida Surveyors, Corp

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

☐ Walk in

☒ Pick up time

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the Corporation shall be:

FLORIDA SURVEYORS, CORP

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

7300 SW 27<sup>TH</sup> PL APT. 3116, DAVIE FL 33314

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

DOING BUSINES IN FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is:

300

**ARTICLE V INITIAL OFFICERS/DIRECTORS**

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

JAIME M VILLEGAS – 7300 SW 27<sup>TH</sup> PL APT 3116, DAVIE FL 33314

**ARTICLE VI REGISTERED AGENT**

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

JAIME M VILLEGAS – 7300 SW 27<sup>TH</sup> PL APT 3116, DAVIE FL 33314

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JAIME M VILLEGAS – 7300 SW 27<sup>TH</sup> PL, APT 3116, DAVIE FL 33314

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

Ⓢ J. Marcos Vives X  
Signature/Registered Agent

5-3-04  
Date

Ⓢ J. Marcos Vives X  
Signature/Incorporator

5-3-04  
Date

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