

P04000142551

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF REVENUE
04 OCT 11 AM 11:17

QB 10/15

TRANSMITTAL LETTER

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

SUBJECT: SPECIAL SERVICES ENTERPRISE, 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: Arturo Lopez

Name (Printed or typed)

14970 SW 296 Street

Address

Leisure City, Florida 33033

City, State & Zip

(786)367 - 8991

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)

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SECRETARY OF STATE
DIVISION OF CORPORATION
04 OCT 11 AM 11:17

ARTICLE I NAME

The name of the corporation shall be:

Special Services Enterprise, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

933 NE 199 Street
Unit 1o3
Miami, Florida 33179

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

1. Import and export commerical products for retailers
2. Establishment of physical therapeutical
3. Establishment of a retail business for sale of clothing from other countries.

ARTICLE IV SHARES

The number of shares of stock is:

There are no shares at the present time.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Erika V. Vasquez, President
933 NE 199 Street
Unit 1o3
Miami, Florida 33179

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

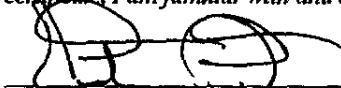
Arturo Lopez
14970 SW 296 Street
Leisure City, Florida 33033

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

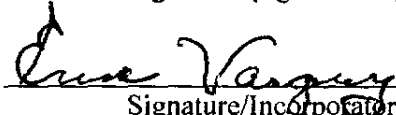
Erka V. Vasquez
933 NE 199 Street
Unit 1o3
Miami, Florida 33179

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

10/7/04
Date



Signature/Incorporator

10/7/04
Date