

PD5000083104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Nelson Varona **CAVE**  
AUTHORIZATION BY PHONE TO  
CORRECT Registered Agent Address  
DATE 6/19/05  
DOC. EXAM MRD

Office Use Only



300055575713

06/08/05--01051--006 \*\*35.00

06/08/05--01051--007 \*\*35.00

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
05 JUN -8 AM 9:50

mes 6/9

TRANSMITTAL LETTER

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

SUBJECT: QUIAR SATELITAL SERVICES, 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      ☐ \$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: RICARDO QUIARDINU MENDOZA  
Name (Printed or typed)

2993 W 80 ST APT 16  
Address

HIACLEAH, FL 33018  
City, State & Zip

(786) 444-6191  
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  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 JUN -8 AM 9:50

**ARTICLE I NAME**

The name of the corporation shall be:

*Quiar Satelital Services, Inc.*

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

*2993 W 80 ST Apt 16  
Hialeah, FL 33018.*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*TV Satelite Installation.*

**ARTICLE IV SHARES**

The number of shares of stock is:

*1*

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

*Ricardo Quiardinu.  
2993 W 80 ST Apt 16  
Hialeah, FL 33018.  
President.*

**ARTICLE VI REGISTERED AGENT**

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

*Ricardo Quiardinu  
2993 W 80 ST Apt 16  
Hialeah, FL 33018*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*Ricardo Quiardinu  
2993 W 80 ST Apt 16  
Hialeah, FL 33018.*

\*\*\*\*\*

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]*  
\_\_\_\_\_  
Signature/Registered Agent

*06-03-05*  
\_\_\_\_\_  
Date

*[Signature]*  
\_\_\_\_\_  
Signature/Incorporator

*06-03-05.*  
\_\_\_\_\_  
Date