

705000105852

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

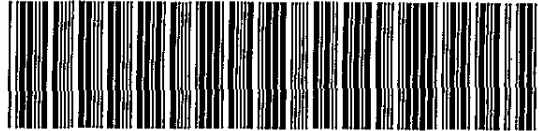
(Business Entity Name)

(Document Number)

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

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05 JUL 28 PM 4:11  
STAFF ARROW  
DIVISION OF TOLSON

J. Shivers JUL 29 2005

105-34281

## TRANSMITTAL LETTER

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

SUBJECT: \_\_\_\_\_

MR, 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: \_\_\_\_\_

Mabel Ruano

Name (Printed or typed)

1525 SW 19 Street

Address

Miami, FL 33145

City, State & Zip

(305) 854-7179

Daytime Telephone number

05 JUL 28 PM 1:16

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**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)

**ARTICLE I NAME**

The name of the corporation shall be:

MABELVA, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

1525 SW 19 Street

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Customer Service

**ARTICLE IV SHARES**

The number of shares of stock is:

1,000

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

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

Mabel Ruano, President  
1525 SW 19 ST, Miami, FL 33145  
Roger Ruano, Vice President  
1525 SW 19 ST, Miami, FL 33145

**ARTICLE VI REGISTERED AGENT**

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

Mabel Ruano  
1525 SW 19 ST  
Miami, FL 33145

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Mabel Ruano  
1525 SW 19 ST  
Miami, FL 33145

\*\*\*\*\*

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

Mabel Ruano

Signature/Registered Agent

7/25/05

Date

Mabel Ruano

Signature/Incorporator

7/25/05

Date

FILE  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 JUL 28 PM 4:14