

P06000127003

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

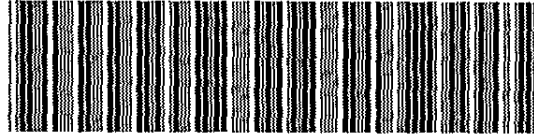
(Business Entity Name)

(Document Number)

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

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06 OCT -4 PM 3:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CB 10-4-06

## COVER LETTER

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

SUBJECT: UruMex Floor Care Corp.

(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: Miguel Sanchez  
Name (Printed or typed)

8771 SW 72nd St., Ste. B6  
Address

Miami, FL 33193  
City, State & Zip

(754)234-3589  
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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**ARTICLE I NAME**

The name of the corporation shall be:

UruMex Floor Care Corp.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

8771 SW 72nd St., Ste. B6, Miami, FI 33193

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Floor Care Service

**ARTICLE IV SHARES**

The number of shares of stock is:

100

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

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

Miguel Sanchez-8771 SW 72nd St., Ste. B6, Miami, FI 33193-Pres.

Nelson Muniz-8771 SW 72nd St., Ste. B6, Miami, FI 33193-Vice-Pres.

**ARTICLE VI REGISTERED AGENT**

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

Miguel Sanchez-8771 SW 72nd St., Ste. B6, Miami, FI 33193

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

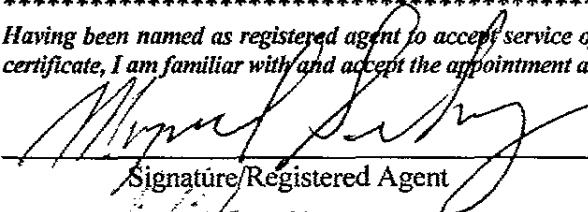
Miguel A. Villanueva

3351 Palm Aire Dr. 209

Pompano Beach, FI 33069

\*\*\*\*\*

*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

10-2-06  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

10/1/06  
\_\_\_\_\_  
Date