

PD6000133646

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

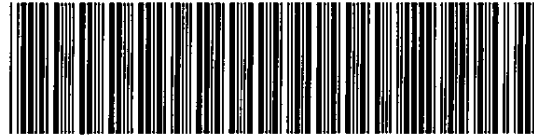
☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



500080561655

10/12/06--01014--016 **78.75

Special Instructions to Filing Officer:

Felipe Rueda **GAVE**
AUTHORIZATION BY PHONE TO
CORRECT Article VII
DATE 10/20/06
DOC. EXAM MRD

Office Use Only

FILED
06 OCT 20 PM 4:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
10/20

206-44871

COVER LETTER

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

SUBJECT: FRV Services INC Co.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Second -> option FEARVA Services.

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: Felipe Rueda ~~XXXXXXXXXX~~
Name (Printed or typed)

5800 MIDEGSTE Blvd apt 333
Address

MIDEGSTE FL 33063
City, State & Zip

954 242 3085
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 12, 2006

Rueda

FELIPE RUEDO
5800 MARGATE BLVD
APT. 333
MARGATE, FL 33063

SUBJECT: FRV SERVICES
Ref. Number: W06000044871

We have received your document for FRV SERVICES and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist
New Filing Section

Letter Number: 706A00060905

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:

FRV Services C.O.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5800 Margate Blvd Apt # 333
Margate FL 33063

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Services of construction
handymen

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Felipe Rueda
5800 Margate Blvd Apt # 333
Margate FL 33063

ARTICLE VI REGISTERED AGENT

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

Felipe Rueda
5800 Margate Blvd Apt # 333
Margate FL 33063

ARTICLE VII INCORPORATOR

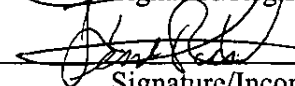
The name and address of the Incorporator is:

Felipe Rueda
5800 Margate Blvd Apt # 333
Margate FL 33063

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



Signature/Incorporator

FILED

06 OCT 20 PM 4:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10-17-06

Date

10-17-06

Date