# P0700003406

(Re	equestor's Name)			
(Ac	ldress)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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SECRETARY OF STATE
ALLARIASSEE REPRINA

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#### TRANSMITTAL LETTER

FILED

07 JAN -8 PH 1: 37

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

Ţ,

SUBJECT:	TRANSERVICES CORPORATION		
	(Proposed corporate name - must include suffix)		

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

□ \$70.00 Filing Fee

**\$78.75** 

Filing Fee

□ \$122.20 Filing Fee

& Certified Copy

□ \$131.25
Filing Fee,
Certified Copy

& Certificate

FROM:

VICTORIA ALVAREZ

& Certificate

Name (Printed or typed)

6911 SW 159th PLACE

Address

MIAMI, FLORIDA 33193-3630

City, State & Zip

(305) 970 8393

Daytime Telephone Number

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

1 1

#### **ARTICLES OF INCORPORATION**

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SECRETARY OF STATE
TALL MEASSEE, PLORIDA
The undersigned, acting as incorporator(s) of a corporation pursuant to Chapter 607,
Florida Statutes, adopt(s) the following Articles of the control of the con Florida Statutes, adopt(s) the following Articles of Incorporation:

### **ARTICLE I**

Name	
The name of the corporation shall be:	
TRANSERVICES CORPORATION	
ARTICLE II Principal place of business and mailing a The principal place of business and the mailing address of	
6911 SW 159th PLACE	_
MIAMI, FLORIDA 33193-3630	<u>_</u>
ARTICLE III Purpose(s) The specific purpose(s) for which the corporation is organized is (a	re):
THE CORPORATION SHALL ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA	
ARTICLE IV The officers of the corporation shall be:	
President: VICTORIA ALVAREZ Secretary VICTORIA ALVAREZ Treasurer: VICTORIA ALVAREZ	

Filing Fee &

CERTIFICATE: \$78.75

#### **ARTICLE V**

#### **Limitation of Corporate Powers**

The corporate powers of the corporation are as provided in Section 607 Florida Statutes, unless limited as follows:

The Corporation shall have the same powers as an individual to do all things necessary or convenient to carry out its business and affairs, subject to any limitations or restrictions imposed by applicable law or these Articles of Incorporation.

The name and the s	initial registered street address of the ini	tial registered agent is:	
	VICTORIA ALVAREZ		
	6911 SW 159th PLAC	<u>E</u>	
	MIAMI, FLORIDA 33193-	3630	
The name(s) and th	e street address(es) of		
	VICTORIA ALVAREZ	·	
	6911 SW 159th PLACE		
	MIAMI, FLORIDA 33193-	3630	
outstanding at any The undersigned in this 4TH day Signature(s) of inco	res of stock that this co one time is: 1,000 ncorporator(s) has (have y of JANUARY 200 prporator(s):	RTICLE VIII orporation is authorized to have Shares. a) executed these Articles of Incorporation 7. name of incorporator signing	
1	Typed	name of incorporator signing	

#### ARTICLE IX

These Articles of Incorporation shall be effective immediately upon approval of the Secretary of the State of Florida.

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

TRANSERVICES CORPORATION

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

	(must include suffix)	l
2. The name and address of the registered age	nt and office is:	
VICTORIA ALVAREZ	·	
(Name)		
(Street address - P.O. Box or Mail	Drop Box NOT accepta	ble)
6911 SW 159 PL Miami, Fl 3		
(City/State/	Zip)	
Having been named as registered agent and to stated corporation at the place designated in the appointment as registered agent and agree to a comply with the provisions of all statutes relating performance of my duties, and I am familiar with position as registered agent.	is certificate, I hereby a ct in this capacity. I fu ng to the proper and co	accept the orther agree to omplete
(Signature)	01/04/07 (Date)	FILED  7 JAN -8 PH 1: 38  ECRETARY OF STATE LLAHASSEE, FLORIDA