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| (City/State/Zip/Phone #)                |  |  |  |  |
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| PICK-UP WAIT MAIL                       |  |  |  |  |
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| (Business Entity Name)                  |  |  |  |  |
|   |  |  |  |  |
| (Document Number)                       |  |  |  |  |
|   |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
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| <u></u>                                 |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
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# **COVER LETTER**

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

| SUBJECT: F&M        | GARCIA SERVICES INCORPORA<br>(PRÓPOSED CORPORA | TED<br>TE NAME – <u>MUST INCL</u> | UDE SUFFIX)  |
|---------------------|--|-----------------------------------|--|
|                     |  |                                   |  |
| Enclosed are an ori | ginal and one (1) copy of the artic            | cles of incorporation and         | a check for:   |
| \$70.00 Filing Fee  | □ \$78.75 Filing Fee & Certificate of Status   | Filing Fee<br>& Certified Copy    | \$87.50 Filing Fee, Certified Copy & Certificate of Status |
| FROM: M             | IARIA F GARCIA & FRANCISCO C<br>Name           | GARCIA<br>(Printed or typed)      |  |
|                     | 716 SW AVENS STREET                            |                                   |  |
|                     | , .  | Address                           | <del> </del>   |
|                     | PORT ST LUCIE, FL 34983                        | State & Zip                       |  |
|                     | City,  | State & Zip                       |  |
|                     | 772 285-8691                                   |                                   |  |
|                     | Daytime I                                      | elephone 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)

## ARTICLE I NAME

The name of the corporation shall be:

#### F & M GARCIA SERVICES INCORPORATED

## ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

716 SW AVENS ST PORT ST. LUCIE, FL 34983

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

#### ARTICLE IV SHARES

The number of shares of stock is:

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

List name(s), address(es) and specific title(s):
-MARIA F GARCIA (P)
716 SW AVENS ST
PORT ST. LUCIE, FL 34983
-FRANCISCO GARCIA (VP, TRES)
716 SW AVENS ST
PORT ST. LUCIE, FL 34983

# ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: FRANCISCO GARCIA

716 SW AVENS ST PORT ST. LUCIE, FL 34983

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARIA F GARCIA 716 SW AVENS ST PORT ST. LUCIE, FL 34983

