

PO9000008/3/

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

Mr. Neira **GAVE**

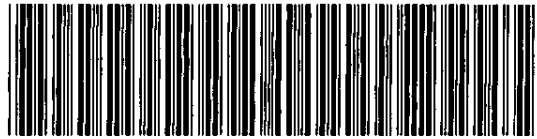
**AUTHORIZATION BY PHONE TO**

**CORRECT** VP/T's name

**DATE** 11/27/09

**DOC. EXAM** VF

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09 JAN 26 PM 3:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

VF

## COVER LETTER

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

SUBJECT: DURAN SERVICES 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: RICARDO A NEYRA  
Name (Printed or typed)

1840 W 49 ST, SUITE 713  
Address

HIALEAH, FL 33012  
City, State & Zip

305-905-9601  
Daytime Telephone number

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

APPROVED  
AND  
FILED

09 JAN 26 PM 3: 51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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:

DURAN SERVICES INC.

### **ARTICLE II PRINCIPAL OFFICE**

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

1840 W 49 ST, SUITE 713  
HIALEAH, FL 33014

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY LAWFULL BUSINESS

### **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):

PRESIDENT  
RICARDO A NEYRA  
1840 W 49 ST, SUITE 713  
HIALEAH, FL 33012

VP/T MARTHA I BOURZAC

### **ARTICLE VI REGISTERED AGENT**

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

RICARDO A NEYRA  
1840 W 49 ST, SUITE 713  
HIALEAH, FL 33012

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

RICARDO A NEYRA  
1840 W 49 ST, SUITE 713  
HIALEAH, FL 33012

\*\*\*\*\*

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

*R. Neyra*

Signature/Registered Agent

*R. Neyra*

Signature/Incorporator

01/22/09  
Date

01/22/09  
Date