

PO9000041063

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

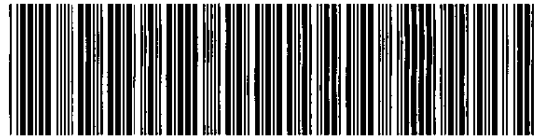
(Business Entity Name)

(Document Number)

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

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02/16/09--01031--003 \*\*78.75

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09 MAY 11 AM 9:13  
SECRETARY OF STATE  
SOUTH CAROLINA

*PK*

**COVER LETTER**

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

**SUBJECT:** SAR Corporation, 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  
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:** Sandra A. Rodriguez  
Name (Printed or typed)

8969 SW 52nd Pl  
Address

Cooper City, FL 33328  
City, State & Zip

305-972-4300  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 6, 2009

SANDRA A RODRIGUEZ  
8969 SW 52ND PL  
COOPER CITY, FL 33328

SUBJECT: SAR EVENTS  
Ref. Number: W09000007667

We have received your document for SAR EVENTS 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.

Please return the corrected 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) 245-6052.

Paisley A Alford  
Clerk  
New Filing Section

Letter Number: 409A00005636

**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:

SAR Events Corporation

**ARTICLE II PRINCIPAL OFFICE**

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

8969 sw 52 Pl  
Cooper City, Fl 33328

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Customer Service

**ARTICLE IV SHARES**

The number of shares of stock is:

1,000

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

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

Sandra Allende Rodriguez, 8969 sw 52 Pl Cooper City, Fl 33328, President  
Santos Amable Rodriguez Jr., 8969 sw 52 Pl Cooper City, Fl 33328, Vice-President

**ARTICLE VI REGISTERED AGENT**

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

Sandra A. Rodriguez 8969 sw 52 Place Cooper City, Fl 33328

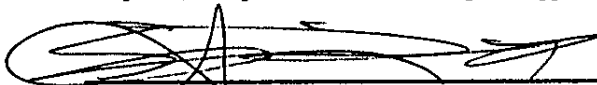
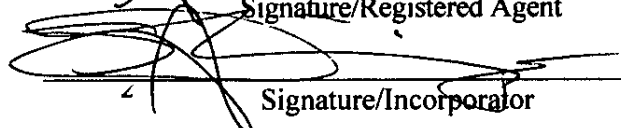
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Sandra A. Rodriguez 8969 sw 52 Place Cooper City, Fl 33328

FILED  
MAY 11 AM 9:13  
SECRETARY OF STATE  
FLORIDA

\*\*\*\*\*  
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

2-26-09  
Date  
2-26-09  
Date