

1P090000044489

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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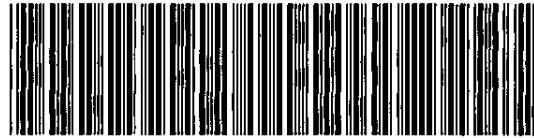
(Business Entity Name)

(Document Number)

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05/05/09--01050--009 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 MAY 19 P 1:55

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5-20-09
62-02-5
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

09 MAY 19 AM 11:36

DIVISION OF CORPORATIONS

May 7, 2009

VICTOR R. EVINS
9737 NW 41 ST., SUITE 195
MIAMI, FL 33178

SUBJECT: UNIVERSAL SERVICES CORPORATION
Ref. Number: W09000021651

We have received your document for UNIVERSAL SERVICES CORPORATION 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please complete article six and seven to include the registered agent and incorporators name.

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) 245-6995.

Wanda Cunningham
Regulatory Specialist II
New Filing Section

Letter Number: 609A00015588

COVER LETTER

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

SUBJECT: UNIVERSAL SERVICES CORPORATION
(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: Victor R. Evans
Name (Printed or typed)

9737 NW 41 St, Ste 195
Address

MIAMI, FL 33178
City, State & Zip

305/951-4708 (night)
Daytime Telephone number

→ (786)-488-4072* (DAY)

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:

UNIVERSAL SERVICES OF MIAMI CORP.

ARTICLE II PRINCIPAL OFFICE

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

9737 NW 41 ST Ste 195

Miami, FL, 33178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MULTISERVICES SOLUTIONS

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):

VICTOR EVINS, President

MARIO LONGAGNANI, VP.

ARTICLE VI REGISTERED AGENT

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

VICTOR EVINS

9737 NW 41 ST Ste 195

Miami FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

VICTOR EVINS

9737 NW 41 ST Ste 195

Miami, FL 33178

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

Date

Date

FILED
2009 MAY 19 P 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA