

P09000065789

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

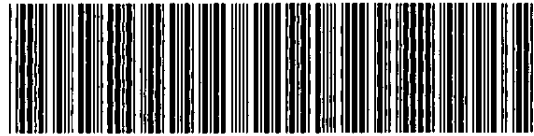
(Document Number)

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Special Instructions to Filing Officer:

W09-
32685

Office Use Only



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07/15/09--01018--006 **78.75

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2009 AUG -3 PM 4:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Burch AUG 4 2009

COVER LETTER

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

SUBJECT: SERVILINK, CORP
(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

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: JOSE F. LORA
Name (Printed or typed)

10220 SW 194TH ST
Address

MIAMI, FL 33157
City, State & Zip

305-772-6539
Daytime Telephone number

bibilora@bellsouth.net
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 16, 2009

JOSE F. LORA
10220 SW 194 SR
MIAMI, FL 33157

SUBJECT: B&E SOLUTIONS, CORP
Ref. Number: W09000032685

We have received your document for B&E SOLUTIONS, CORP 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.

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

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) 245-6928.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 109A00024469

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DEPARTMENT OF STATE
09 AUG - 3 AM 10:47

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2009 AUG -3 PM 4: 27

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: **SERVILINK, CORP**

ARTICLE II PRINCIPAL OFFICE

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

10220 SW 194TH ST
MIAMI, FL 33157

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:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JOSE F. LORA- PRESIDENT

ARTICLE VI REGISTERED AGENT

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

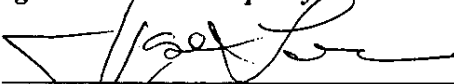
JOSE F. LORA
10220 SW 194TH ST
MIAMI, FL 33157

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JOSE F. LORA
10220 SW 194TH ST
MIAMI, FL 33157

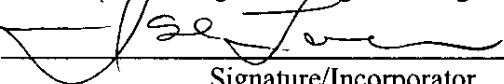
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

07/30/2009

Date



Signature/Incorporator

07/30/2009

Date