# P09000075122

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SECRETARY OF STATE
ALL AHASSEE ELECTE

B. McKnight SEP 0 9 2009

# **COVER LETTER**

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

SUBJECT:	BONITA MULTISERVICES INC			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:	
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	DPY REQUIRED	
FROM:	GUSTAVO PAIZ			
	Name	e (Printed or typed)		
	26591	LINCOLN AVE		
		Address		
<u></u>		RINGS FL 34135		
	City,	State & Zip		
		287 4054		
	Daytime T	elephone number		
	PAIZGUS@HOTMAIL.COM			
	E-mail address: (to be used for future annual report notification)			

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:

**Bonita MultiServices Inc** 

### ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is: 26591 Lincoln Ave

Bonita Springs FI 34135

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This Corporation is organized for the purpose of transacting any or all lawful business.

### ARTICLE IV SHARES

The number of shares of stock is:

The maximum number of share of stock which this corporation is authorized to have outstanding at any time is One Thousand (1000) shares of common stock each having one dollar (\$1.00) par value.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Gustavo Paiz

VP

**Douglas Torres** 

President

26591 Lincoln Ave

26591 Lincoln Ave

Bonita Springs Fl 34135

Bonita Springs FI 34135

## ARTICLE VI REGISTERED AGENT

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

Gustavo Paiz

26591 Lincoln Ave

Bonita Springs FI 34135

# ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Francisco Valle 2015 Schooner Dr LaBelle Fl 33935

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

gree to act in this capacity	
( William from	08/28/2009
Signature/Registered Agent	Date
wagle	08/28/2009
Signature/Incorporator	Date