

710000059089

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200180540882

05/14/10 - 01015 - 030 **87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 JUL 19 PM 1:34

FILED

J. Stivers JUL 21 2010

W10-27172
191
193

W10-27534
191
193
195

does not
speak english

COVER LETTER

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

SUBJECT: Ladron de Guevara Health 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

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

ADDITIONAL COPY REQUIRED

FROM: Ariadne Ladron de Guevara

Name (Printed or typed)

13205 SW 58 Terrace #4

Address

Miami, FL 33183

City, State & Zip

786-362-0388

Daytime Telephone number

ariadnel@msn.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 JUL 19 PM 1:34

FILED

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:

Ladron de Guevara Health Services, Inc.

ARTICLE II PRINCIPAL OFFICE

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

13205 SW 58 Terrace #4

Miami, FL 33183

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Consulting

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):

Ladron de 13205 SW 58
Guevara, Terrace #4
Ariadne Miami, FL 33183

ARTICLE VI REGISTERED AGENT

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

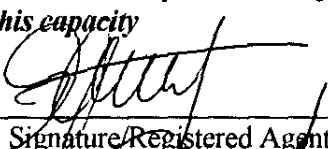
Ladron de Guevara, Ariadne
13205 SW 58 Terrace #4 Miami, FL 33183

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LADRON DE GUEVARA, Ariadne
13205 SW 58 TERRACE #4 Miami FL 33183

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

May 10, 2010

Date

Date

FILED
2010 JUL 19 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA