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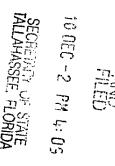
(Requestor's Name)				
		-		
(Ad	dress)			
(Address)				
/C#	u/State/7in/Dhan	- 40		
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
_				
(Bu	siness Entity Nar	ne)		
(-		,		
(Do	cument Number)			
Certified Copies	Certified Copies Certificates of Status			
Special Instructions to	Filina Officer:			
opedar mendendia to raming officer.				
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12/02/10--01010--002 **78.75





COVER LETTER

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

SUBJECT: ABC PROFESSIONAL SERVICES CORP. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

cles of incorporation and a check for:
\$78.75 Filing Fee & Certified Copy & Certificate o Status ADDITIONAL COPY REQUIRED
S (Printed or typed)
Address
State & Zip
elephone number
MAIL.COM d 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 The name of the corp	VAME ABC PROFESSIONAL oration shall be:	SERVICES CORP	
69	PRINCIPAL OFFICE Principal street address 01 SW 110th AVE AMI, FL. 33173	Mailing address, if different is:	
The purpose for whi	URPOSE ch the corporation is organized is: AWFUL BUSINESS		
	JHARES		APPOLICED 10 DEC -2 PH SECRETARY OF TALLAHASSEE, FI
	NITIAL OFFICERS AND/OR DIRECTOR		- CC !!
Name and Title	BERNARDO A. IGLESIAS		
Address:	.6901 SW 110th AVE MIAMI, FL .33173		₩ 0
Name and Title	o:	Name and Title	
Address:		Address:	
Name and Title	2:	Name and Title	 , , , , , , , , , , , , , , , , , , ,
Address:			
		<u> </u>	
ARTICLE VI R	EGISTERED AGENT		
The name and Florid	da street address (P.O. Box NOT acceptable) or	f the registered agent is:	
Name:	BERNARDO A IGLESIAS		
Address:	6901 SW 110th AVE MIAMI, FL 33173	- -	
ARTICLE VII	NCORPORATOR		
	ess of the Incorporator is:		
Name:	BERNARDO A IGLESIAS	_	
Address:	6901 SW 110th AVE MIAMI, FL. 33173	_ _	
Having been named this certificate, I am	as registered agent to accept service of proces familiar with and accept the appointment as reg	s for the above stated corpor istered agent and agree to ac	ration at the place designated in t in this capacity
	<i>S</i> / .		11/29/2010
·	Required Signature/Registered Agent		Date
I submit this docum	ent and affirm that the facts stated herein are arthent of State constitutes a third degree felon	true. I am aware that the f	Calse information submitted in a 5. F.S.
	4///	, <u> </u>	11/20/2010

Kequired Signature/Incorporator