

P110000002008

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

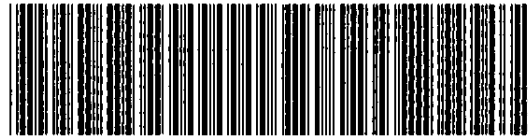
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2011 JAN -6 PM 4:41  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

FILED

1 Bush JAN 7 2011

## COVER LETTER

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

**SUBJECT:** E.M. EQUIPMENTS AND APPLIANCES REPAIR, 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 Filing Fee  
☒ \$78.75 Filing Fee  
& Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** ERNESTO VAZQUEZ MUNOZ  
Name (Printed or typed)

6701 SW 64TH AVE  
Address

SOUTH MIAMI, FL. 33143  
City, State & Zip

(786)355-1094  
Daytime Telephone number

mechanical2311@yahoo.es  
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: **E.M. EQUIPMENTS AND APPLIANCES REPAIR, CORP.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
**6701 SW 64TH AVE**  
**SOUTH MIAMI, FL 33143**

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
**Appliances reparation and services related with the trade.**

**ARTICLE IV SHARES**

The number of shares of stock is: **1 stock equivalent \$1, 100% of stock**

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: <b>Ernesto Vazquez, Director</b>	Name and Title: _____
Address: <b>6701 SW 64TH AVE</b>	Address: _____
<b>SOUTH MIAMI, FL 33143</b>	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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

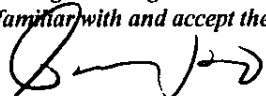
Name: **Ernesto Vazquez**  
Address: **6701 SW 64TH AVE**  
**SOUTH MIAMI, FL 33143**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **Ernesto Vazquez**  
Address: **6701 SW 64TH AVE**  
**SOUTH MIAMI, FL 33143**

*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*

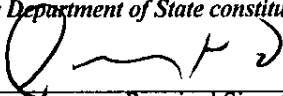


Required Signature/Registered Agent

**01/03/2011**

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*



Required Signature/Incorporator

**01/03/2011**

Date

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA