

P11000022476

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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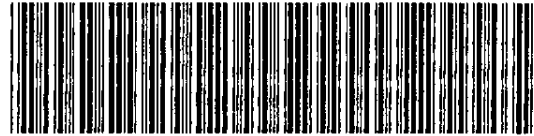
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/17/11--01039--010 **78.75

W1-9932

FILED

2011 MAR -3 PM 4:41

STATE OF TEXAS
CLERK OF COURTS

18 MAR 2011

COVER LETTER

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

SUBJECT: A. Dominguez Servicios 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 Filing Fee
☒ \$78.75 Filing Fee
& Certificate of Status

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

FROM: Alejandro Juarez Dominguez
Name (Printed or typed)

8513 N Seminole Ave.
Address

Tampa, FL 33604
City, State & Zip

813-217-2118
Daytime Telephone number

Alejandrojuarez2012@hotmail.com
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

RECEIVED
11 MAR -3 PM 3:43
SECRETARY OF STATE
TALLAHASSEE FLORIDA

February 18, 2011

ALEJANDRO J DOMINGUEZ
8513 N SEMINOLE AVE
TAMPA, FL 33604

SUBJECT: A. DOMINGUEZ SERVICES INC.
Ref. Number: W11000009932

We have received your document for A. DOMINGUEZ SERVICES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please type the name name of the corporation in article I.

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: 011A00004248

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: A. DOMINGUEZ SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

8513 N Seminole Ave
Tampa, FL 33604

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: For all lawful business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Alejandro Juarez Dominguez (president) Name and Title: _____
Address: 8513 N Seminole Ave Address: _____
Tampa, FL 33604

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: Alejandro Juarez Dominguez
Address: 8513 N Seminole Ave
Tampa, FL 33604

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Alejandro Juarez Dominguez
Address: 8513 N Seminole Ave
Tampa, FL 33604

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

Alejandro Juarez Dominguez
Required Signature/Registered Agent

2-16-11
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.

Alejandro Juarez Dominguez
Required Signature/Incorporator

2-16-11
Date

FILED
2011 MAR -3 PM 4:41
CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
THE COUNTY OF HILLSBORO, FLORIDA