P11000033611

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business	Entity Name)			
(Documer	it Number)			
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SECRETASSEE FLORIDA

TALLAHASSEE FLORIDA

12461

COVER LETTER

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

SUBJECT: 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	
FROM: TUREO CORP Name (Printed or typed) 10430 S.W. 145 Are Address Address City, State & Zip Daytime Telephone number	
Daytime Telephone number Mariaquiras 9 Chot mail. com V E-mail address: (to be used for future annual report notification)	

NOTE: Please provide the original and one copy of the articles.



March 9, 2011

YURCO CORP 10430 SW 145 AVE MIAMI, FL 33186

SUBJECT: YURCO CORP Ref. Number: W11000013450

We have received your document for YURCO CORP and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Your letter of release has the wrong document number and the wrong corporate name on it.

Please return 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) 245-6913.

Diane Cushing Regulatory Specialist II Supervisor

www.sunbiz.org

Letter Number: 211A00005779

February 19, 2011

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

Re: P07000085962 P07000128864

To whom it may concern:

By means of this letter I am advising that I have no intentions of re-instating the above mentioned dissolved corporation.

Should you have any questions or concerns please do not hesitate to contact me at 305 595-2407.

Sincerely,

Cecilia Cuenca

2011 MAR 28 PM 2: 14
SECRELARY OF STATE
SECRETARY O

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I The name of the co	NAME upporation shall be: YURLo CORP		
ARTICLE II	PRINCIPAL OFFICE		
111111111111111111111111111111111111111	Principal street address	Mailing address, if different is:	
_	9501 Fountainbleu Blud +3303	10430 5 4	1.145 Ave
_	miami FL 33/12	miami, A	33/86
-			
ARTICLE III	PURPOSE		
	hich the corporation is organized is:		
• •			2011 HAR SECRET
		•	
<u> </u>			(5) N FT
EZINA 20	- 088(GJ)		SEE O
ARTICLE IV			TO P
The number of sha	res of stock is: 100 C \$ 1.00 ex.		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR	98	COR ?:
	itle: Cecilia Counce that Pres		50
Address:	9501 Fountain blear the 3303	Address:	
	mica 133172		
-			
Name and T	itle:	Name and Title	
Address:	nic.	Address:	
Name and T	itle:	Name and Title:	
Address:	me.		
ridaress.			
ADDIOLE III	DEGICATEDED ACENT		
	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable) o	f the registered agent is:	
Name:		i the registered agent is.	
Address:	9501 Fountain blea Blud 1	<u> </u>	
	MIEM FL 33/72	-	
ADMICE D IIII	TAYOO D DOOR A STOR		
The name and ad	INCORPORATOR dress of the Incorporator is:		
Name:	Ceditia Cyana		
Address:	9501 Folidambles Blud + 330	_ 	
	mu pl 3 3176	→	
Uming been now	ed as registered agent to accept service of proces	es for the above stated corners	tion at the place designated in
	m familiar with and accept the appointment as reg		
certificate, rai		Sole, on agoin and ago as is not	
(Lecila Cama		2/24/
	Required Signature/Registered Agent		Date
I submit this docu	iment and affirm that the facts stated herein are	true. I am aware that the fac	lse information submitted in a
	epartment of State constitutes a third degree felon	y as provided for in s.817.155,	F.S130/0
	- ealer Cum de		2/24//
		 	Date
	Required Signature/Incorporator		Date