

P11000042067

(Requestor's Name)

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☐ PICK-UP

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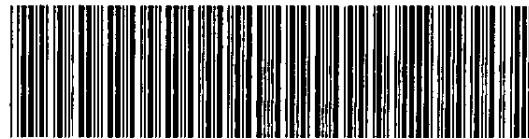
(Business Entity Name)

(Document Number)

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04/20/11--01024--023 **78.75

FILED
11 APR 29 PM 3:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
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641 22147

COVER LETTER

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

SUBJECT: ALAIN PEREZ SERVICES 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

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: ALAIN E. PEREZ
Name (Printed or typed)

28798 OLD DIXIE HWY
Address

HOMESTEAD, FL 33033
City, State & Zip

561-441-3821
Daytime Telephone number

PEREZALAIN69@YAHOO.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

April 21, 2011

ALAIN E PEREZ
28798 OLD DIXIE HWY
HOMESTEAD, FL 33035

RECEIVED APR 29 2011

SUBJECT: ALAIN SERVICES, CORP.
Ref. Number: W11000022442

We have received your document for ALAIN SERVICES, CORP. and your check(s) totaling \$78.75. 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.

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) 245-6879.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 711A00009728

FILED

11 APR 29 PM 3:00

ARTICLES OF INCORPORATION

SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I – NAME

The name of the corporation shall be:

ALAIN PEREZ SERVICES CORP.

ARTICLE II – PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

**28798 OLD DIXIE HWY
HOMESTEAD, FL 33033**

ARTICLE III – SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 NO PAR VALUE

ARTICLES IV – INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**ALAIN E. PEREZ
28798 OLD DIXIE HWY
HOMESTEAD, FL 33033**

FILED

ARTICLE V – INCORPORATORS(S)

11 APR 29 PM 3: 00

The name(s) and street address (es) of the incorporator(s) to these Articles of Incorporation is (are)

ALAIN E. PEREZ – PRESIDENT
28798 OLD DIXIE HWY
HOMESTEAD, FL 33033

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 1ST day of April, 2011



Signature

ARTICLE VI – DIRECTOR(S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

ALAIN E. PEREZ – PRESIDENT
28798 OLD DIXIE HWY
HOMESTEAD, FL 33033

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.



Registered Agent