

PII 0000046623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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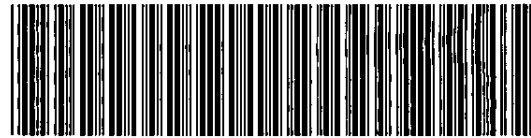
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
2011 MAY 13 PM 2:30  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301

## COVER LETTER

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

SUBJECT: A & A SERVICES OF SOUTH FLORIDA 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: JOSE E ALVAREZ  
Name (Printed or typed)

2150 NW 154 STREET  
Address

MIAMI FLORIDA 33054  
City, State & Zip

786 344 7944  
Daytime Telephone number

CARMENARZU@BELLSOUTH.NET  
E-mail address: (to be used for future annual report notification)

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

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TALLAHASSEE, FLORIDA

**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&A SERVICES OF SOUTH FLORIDA CORP.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2150 NW 154 STREET

MIAMI FLORIDA 33054

Mailing address, if different is:

SAME

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**PROFESIONAL SERVICES**

**ARTICLE IV SHARES**

The number of shares of stock is: **100**

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

Name and Title: JOSE E ALVAREZ PRES/OWNER

Address:

2150 NW 154 ST

MIAMI 33054

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: CARMEN ARZU SEC/ TRS

Address:

2150 NW 154 ST

MIAMI 33054

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: CARMEN ARZU

Address: 2150 NW 154 ST

MIAMI FLORIDA 33054

**ARTICLE VII INCORPORATOR**

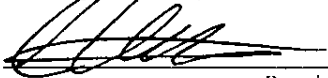
The name and address of the Incorporator is:

Name: CARMEN ARZU

Address: 2150 NW 154 ST

MIAMI FLORIDA 33054

*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*

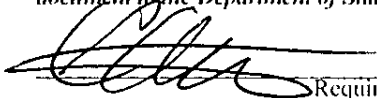


Required Signature/Registered Agent

05/05/2011

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

05/05/2011

Date

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