# P11000de(231

(Re	equestor's Name)			
(				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
·				
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
		<del></del>		
<del></del>				
Special Instructions to	Filing Officer:			
		1		
		1		

Office Use Only



100209685571

07/08/11--01006--006 \*\*70.00

DIVISION OF CORPORALION

P37/25/1



## RECEIVED 11 JUL 22 AMII: 12

### SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 11, 2011

TANIA M SUVERO 17580 NW 67 PL APT J HIALEAH, FL 33015

SUBJECT: TA-MAR SERVICES, INC.

Ref. Number: W11000036493

We have received your document for TA-MAR SERVICES, INC. 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6901.

Pamela Smith Regulatory Specialist II

Letter Number: 811A00016425

www.sunbiz.org

DO DOV COOR Well-bases Florida 200

#### **COVER LETTER**

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

SUBJECT: I A-MAR SERVICES, I	NC.		
(PROPOSED CORPORA	TË NAME – <u>MUST INCLUDE SUFFIX</u> )		
Enclosed are an original and one (1) copy of the arti	icles of incorporation and a check for:		
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75  Filing Fee & Certified Copy & Certificate of Status  ADDITIONAL COPY REQUIRED		
Tania	M. Course		
FROM: Tania M Suvero Name (Printed or typed)			
,	W 67 PL APT.J		
Hialea	h, FL 33015 State & Zip		
	97-2509 elephone number		
E-mail address: (to be used	notmail.com d 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 II	PRINCIPAL OFFICE		
	Principal street address	. Mailing a	ddress, if different is:
	17580 NW 67 PL Apt.J		PL Apt.J
Ŀ	dialeah, FL 33015	<u>Miami, FL 3301</u>	5
ARTICLE III	PURPOSE		
The purpose for w	hich the corporation is organized is:		
Different Ser	vices and Sales.		
ARTICLE IV	SHARES res of stock is: 100		
	INITIAL OFFICERS AND/OR DIRE	CTORS	
	itle: Tania M Suvero- President		
Address:	17580 NW 67 PL Apt.J	Address:	
	Hialeah, FL 33015	_ <del></del>	
		<del></del>	
Name and Ti	itle: Mario Suvero - Manager	Name and Title:	
Address:	17580 NW 67 PL Apt.J		
	Hialeah, FL 33015		
Na 2 m	(a)	27 1001	<b></b> =
Name and 11 Address:	tle:		70 CD
Address:			
		<del></del>	N 95
		<del></del>	7 727
	REGISTERED AGENT		<b>P</b> 980
The <u>name and Flor</u> Name:	rida street address (P.O. Box NOT accepta		PH PH
Address:	Tania M Suvero	<del></del>	- AA
Address.	17580 NW 67 PL Apt J Hialeah, FL 33015		53 TIONS
		<del></del>	3 35
	<u>INCORPORATOR</u>		
	<u>lress</u> of the Incorporator is:		
Name:	Mario Suvero		
Address:	17580 NW 67 PL Apt.J Hialeah, FL 33015		
Having been name	ed as registered agent to accept service of	process for the above stated corpo	ration at the place designated in
this certificate, I an	n familiar with and accept the appointment	t as registered agent and agree to ac	et in this capacity
	( top of the state		07/05/2011
	Required Signature/Registered Age	nt	Date
submit this document	ment and affirm that the facts stated here	ein are true. I am aware that the f	false information submitted in a
ocument to the De	partment of State constitutes a third degree	e jeiony as provided for in s.817.15:	5, F.S.
711h	2 Cum		07/05/0044
y y wee	Required Signature/Incorporator		07/05/2011 Date
,	required signature interreporator		Date