

P11000109319

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

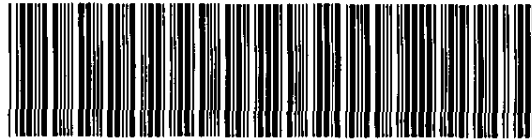
(Document Number)

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Certificates of Status \_\_\_\_\_

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RECEIVED  
11 DEC 30 PM 12:21  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
FILED  
11 DEC 30 AM 12:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12-30-11  
D

## COVER LETTER

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

SUBJECT: Warrior Property Services  
(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: Luis Guerrero  
Name (Printed or typed)  
2222 Parrot Ln  
Address  
Tallahassee FL 32304  
City, State & Zip  
850-251-5117  
Daytime Telephone number  
lrg7627@hotmail.com  
E-mail address (to be used 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)

Effective: Jan. 1st 2012  
FEIN: 45-2996985

**ARTICLE I NAME**

The name of the corporation shall be: Warrior Property Services, Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2222 Parrot Ln  
Tallahassee FL 32304

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and lawful business

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Luis Guerrero President

Address: 2222 Parrot Ln

Tallahassee FL 32304

Name and Title: 2222 Parrot Ln

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

Name and Title: Julian F Gonzalez CEO

Address: 2222 Parrot Ln

Tallahassee FL 32304

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: Luis Guerrero

Address: 2222 Parrot Ln

Tallahassee FL 32304

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Luis Guerrero

Address: 2222 Parrot Ln

Tallahassee FL 32304

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

Luis Guerrero

Required Signature/Registered Agent

12-30-11

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.

Luis Guerrero

Required Signature/Incorporator

12-30-11

Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA