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PICK-UP WAIT MAIL		
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COVER LETTER

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

_{SUBJECT:} YMC QUALITY SERV	ICES,INC
(PROPOSED CORPORA	ATE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the art	ticles of incorporation and a check for:
	·
570.00 7878.75	\$78.75 \$87.50
Filing Fee Filing Fee	☐Filing Fee, ☐Filing Fee,
& Certificate of Status	& Certified Copy Certified Copy
	& Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: YANELIET MUJICA	
Nam	e (Printed or typed)
4400 0\\\ 445 \\\	
<u>1460 SW 145 AVE</u>	Address
MIAMI FL 33184	
City	, State & Zip
305-776-4409	
Daytime	Telephone number
YANELIETMUJICA@H(OTMAIL COM
E-mail address: (to be use	ed 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 address, if different is:
	1460 SW 145 AVENUE	
	MIAMI,FL 33184	
ARTICLE III	PURPOSE	Contra
The purpose for CONSULTA	which the corporation is organized is:	PAPR II
	CHADEC	PA EE
ARTICLE IV The number of sh	nares of stock is: 1	
	INITIAL OFFICERS AND/OR DIRE	
	Title: YANELIET MUJICA	Name and Title: PRESIDENT
Address:	1460 SW 145 AVE	Address:
Name and	Title:	Name and Title:
Address:		Address:
Name and	Title [,]	Name and Title:
Address:		Address:
ARTICLE VI	REGISTERED AGENT	
	lorida street address (P.O. Box NOT accep	table) of the registered agent is:
Name:	YANELIET MUJICA	
Address:	1460 SW 145 AVE	
	MIAMI FL 33184	
ARTICLE VII	INCORPORATOR	
	ddress of the Incorporator is:	
Name:	YANELIÉT MUJICA	
Address:	1460 SW 145 AVE	
	MIAMI FL 33184	
Having been na this certificate, I	med as registered agent to accept service of am familiar with and accept the appointmen	f process for the above stated corporation at the place designated into as registered agent and agree to act in this capacity
	Nhun	03-22-2012
	Required Signature/Registered Ag	
	/// //	,
	cument and affirm that the facts stated he Department of State constitutes a third degr	rein are true. I am aware that the false information submitted in ee felony as provided for in s.817.155, F.S.
		03-22-2012
	Required Signature/Incorporate	
	isoquired Signature/incorporate	Julie Dute