

P12000044271

(Requestor's Name)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
5/11/12

COVER LETTER

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

SUBJECT: **MELRUB ENTERPRISES INC**

(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: **RAQUEL NIETO**

Name (Printed or typed)

17745 SW 141 CT

Address

MIAMI, FLORIDA 33177

City, State & Zip

305-726-3667

Daytime Telephone number

rnieto002@fiu.edu

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)

ARTICLE I NAME

The name of the corporation shall be: MELRUB ENTERPRISES INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
17745 SW 141 CT.
MIAMI, FLORIDA 33177

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
general business

ARTICLE IV SHARES

The number of shares of stock is: 100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Raquel Nieto, President & Secretary
Address: 17745 SW 141 Ct
Miami, Florida 33177

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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:

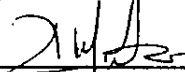
Name: Raquel Nieto
Address: 17745 SW 141 Ct
Miami, Florida 33177

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Raquel Nieto
Address: 17745 SW 141 Ct
Miami, Florida 33177

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

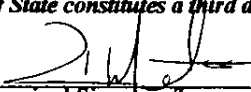


Required Signature/Registered Agent

5/7/12

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

5/7/12

Date

FILED
12 MAY 10 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA