l of state 66 // ori Der me ion of Corporations **Electronic Filing Cover Sheet** Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H12000209070 3))) H120002090703ABCV Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. To: RECEIVED AUG 2 0 2012 Division of Corporations Fax Number : (850) 617-6381 From: Account Name : ACCOUNTING REVENUE SERVICE, INC. Account Number : I20110000041 Phone : (305)887-8730 : (305)887-8744 Fax Number **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address: FLORIDA PROFIT/NON PROFIT CORPORATION N SAGRERAS ENTERPRISES, INC. с Us Certificate of Status 0 Certified Copy 0 Page Count 01 Estimated Charge \$70.00 ക - 08/21/12

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COVER LETTER

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

SUBJECT: SAGRERAS 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:

1	\$70.00		
•	\$70.00 Filing Fee		

Filing Fee & Certificate of Status

\$78.75

\$78.75	\$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL C	OPY REQUIRED

FROM: CRESCENCIA A SAGRERAS

Name (Printed or typed)

<u>91 E 13TH ST</u>

Address

HIALEAH, FL 33010

City, State & Zip

305-469-3945

Daytime Telephone number

INFO@ARSTAXES.COM 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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(((H12000209070 3)))

08/17,2012

To whom it makes concern

Please be advised that the owners of the corporation SAGRERAS ENTERPRISES, INC. with the document number $\underline{P11000029055}$ are the same as those who are opening this new corporation with the same name.

In Addition be advice that we have no intention of reinstating, therefore we are releasing the name.

Thank you.

Sincerely Crescencia Sagreras QHongunn

President

12 AUG 20 83 11:32 AUG 20 83 11:32 MULANSSEE FLORID

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address 102 W 8TH ST HIAI FAH, FL 33010

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is:1000 SHARES AT \$1.00 PER VALUE

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

	le: <u>CRESCENCIA A SAGRERAS / P</u>	_ Name and Title: <u>VICTORIA</u>	
Address:	<u>102 W 8TH ST</u>		<u>H ST</u>
	HIALEAH_EL 33010	<u> </u>	FL 33010
Name and Titl Address:	le:	Address:	· · · · ·
Name and Tit Address:	le:	Name and Title: Address:	
	REGISTERED AGENT		
The <u>name and Flor</u> Name: Address:	ida street address (P.O. Box NOT acceptable) o CRESCENCIA A SAGRERAS 102 W 8TH ST HIALEAH, FL 33010		AUG 20 LANA SSE
ARTICLE VII	INCORPORATOR		
The <u>name and adds</u>	ress of the Incorporator is:		- Gr · · · ·
Name:	CRESCENCIA A SAGRERAS		
Address:	102 W 8TH ST		
	HIALEAH, FL 33010		$\overline{>}$

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 1

(Xagler	08/17/2012
Required Signature/Registered Agent	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

08/17/2012 Date

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