

P/3000044485

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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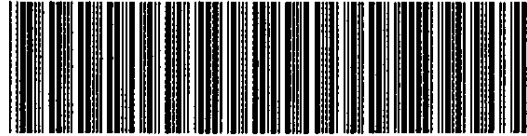
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓ 05/21/13

COVER LETTER

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

SUBJECT: **Property Rehab Services Of SW Florida 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: **Eleazar E. Cano**
Name (Printed or typed)
822 Nicholas Parkway W.
Address
Cape Coral, Florida 33991
City, State & Zip
407-252-0892
Daytime Telephone number
eecano1167@yahoo.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)

ARTICLE I NAME

The name of the corporation shall be: Property Rehab Services Of SW Florida Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

822 Nicholas Parkway W.

Cape Coral

Florida 33991

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO PROVIDE REHABILITATIONAL SERVICES TO HOMES AND BUSINESSES IN SW FLORIDA

ARTICLE IV SHARES 99

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Leonidas Ferreras-CEO

Address: 1720 NW 17th. St.

Cape Coral

Florida 33993

Name and Title: Elvis Bonilla-Tres.

Address: 3316 SW 17th. Pl.

Cape Coral

Florida 33914

Name and Title: Estela Auxila-Cano-Tres.

Address: 822 Nicholas Parkway W.

Cape Coral

Florida 33991

Name and Title: Eleazar E. Cano-Asst. Tres.

Address: 822 Nicholas Parkway W.

Cape Coral

Florida 33991

Name and Title: Silvia Alvarez-Secr.

Address: 3316 17th. Pl.

Cape Coral

Florida 33914

Name and Title: Nancy Ferreras-Asst. Secre.

Address: 1720 NW 17th. St.

Cape Coral

Florida 33993

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TALLAHASSEE, FLORIDA

(conti)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Eleazar E. Cano
Address: 822 Nicholas Parkway W.
Cape Coral, Florida 33991

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ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Eleazar E. Cano
Address: 822 Nicholas Parkway W.
Cape Coral, Florida 33991

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

Eleazar E. Cano 5-15-2013
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.

Eleazar E. Cano 5-15 2013
Required Signature/Incorporator Date