

P13000047230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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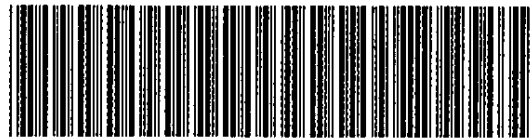
(Business Entity Name)

(Document Number)

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13 MAY 30 PM 4:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2 73726

COVER LETTER

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

SUBJECT: **NewXs corp**

(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: **Johan S Giraldo**

Name (Printed or typed)

1591 W Fairway Rd

Address

Pembroke Pines , FL ,33026

City, State & Zip

954-505-1813

Daytime Telephone number

johan11rm@gmail.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 23, 2013

JOHAN S. GIRALDO
1591 W FAIRWAY RD
PEMBROKE PINES, FL 33026

SUBJECT: NEWXS CORP
Ref. Number: W13000023736

RECEIVED
13 MAY 30 PM 4: 17
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for NEWXS CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 213A00009736

ARTICLES OF INCORPORATION

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

FILED

ARTICLE I NAME
The name of the corporation shall be: NewXs corp

13 MAY 30 PM 4: 32

ARTICLE II PRINCIPAL OFFICE
Principal street address

SECRETARY OF STATE
MAILING ADDRESS, IF DIFFERENT
TALLAHASSEE, FLORIDA

1591 W Fairway Rd
Pembroke Pines , FL , 33026

N/A

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Open business

ARTICLE IV SHARES
The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Johan S Giraldo (President)

Name and Title: N/A

Address: 1591 W Fairway Rd
Pembroke Pines , FL , 33026

Address: _____

Name and Title: N/A

Name and Title: N/A

Address: _____

Address: _____

Name and Title: N/A

Name and Title: N/A

Address: _____

Address: _____

Name and Title: N/A Name and Title: N/A **FILED**
Address: _____ Address: 13 MAY 30 PM 4: 32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: (~~scribble~~) Johan S Giraldo
Address: 1591 W Fairway Rd
Pembroke Pines, FL 33026

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Johan S Giraldo
Address: 1591 W Fairway Rd
Pembroke Pines , FL , 33026

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

(~~scribble~~) Johan 5/22/13
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.

Johan 4/15/13
Required Signature/Incorporator Date