

P13000068618

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☐ PICK-UP

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(Business Entity Name)

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Office Use Only



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13 AUG 16 AM 2:58
SECTION OF STATE
DIVISION OF CORPORATIONS

8/21

[Handwritten signature]

[Handwritten initials]

W/13-40168

COVER LETTER

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

SUBJECT: **Millar Service Solutions 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: **Armando Marquez**

Name (Printed or typed)

10035 SW 12 ter

Address

Miami Fl 33174

City, State & Zip

305 342 3677

Daytime Telephone number

Millarservices@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

July 30, 2013

NELIDA DIAZ
10035 SW 12 TER
MIAMI, FL 33174

SUBJECT: SERVICE AND ADVISORS GROUP INC
Ref. Number: W13000040468

RECEIVED
13 AUG 16 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

new name

We have received your document for SERVICE AND ADVISORS GROUP INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return 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.

Jessica A Fason
Regulatory Specialist II

Letter Number: 013A00017475

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: **Millar Service Solutions Inc**

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3859 SW 99 Ave # 4

Miami FL 33165

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Services

ARTICLE IV SHARES 100

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Agustina Rodriguez**

Name and Title: **P**

Address: **3859 SW 99 Ave # 4**
Miami FL 33165

Address:

Name and Title: **Armando Marquez**

Name and Title: **VP**

Address: **10035 SW 12 Ter**
Miami FL 33174

Address:

Name and Title:

Name and Title:

Address:

Address:

13 AUG 16 AM 2:50

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

(cont.)

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: Armando Marquez

Address: 10035 SW 12 ter

Miami FL 33174

ARTICLE VII INCORPORATOR

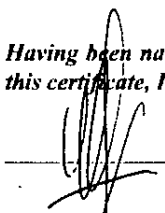
The name and address of the Incorporator is:

Name: Armando Marquez

Address: 10035 SW 12 Ter


Miami FL 33174

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


ARMANDO MARQUEZ
Required Signature/Registered Agent

8/13/13
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.


ARMANDO MARQUEZ
Required Signature/Incorporator

8/13/13
Date

13 AUG 16 AM 2:58
DIVISION OF CORPORATIONS
STATE OF FLORIDA