

P13000884113

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the tax audit number (shown below) on the top and bottom of all pages of the document.

((H13000238907 3)))



H130002389073ABCO

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

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
INSTAFIX MOBILE INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

FILED

13 OCT 28 AM 10:29

RECEIVED

13 OCT 28 PM 2:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

md 10/29

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

ARTICLE I NAMEThe name of the corporation shall be: Instafix Mobile Inc**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

7001 W 35 Ave #218
Hialeah Gardens, FL
33018

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: Mobile Repairs**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Ivan Carlos Rodriguez Name and Title: _____Address: 7001 W 35 Ave #218 Address: _____

Hialeah Gardens FL
33018

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

H13000238907

H13000238907

(cont.)

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

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Juan C. Rodriguez
Address: 7001 W 35 Ave #218
Hialeah Gardens FL 33018

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Juan C. Rodriguez
Address: 7001 W 35 Ave #218
Hialeah Gardens FL 33018

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

Juan C. Rodriguez
Required Signature/Registered Agent

10-28-13
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.

Juan C. Rodriguez
Required Signature/Incorporator

10-28-13
Date

H13000238907