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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MD 6/26

COVER LETTER

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

SUBJECT: MAERSK SERVICES, 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: MARGELYS PUERTO

Name (Printed or typed)

4920 NW 79TH AV APT 113

Address

DORAL FL 33166

City, State & Zip

7863252416

Daytime Telephone number

Admon@mearsk.com.vt

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: MEARSK SEVICES.INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

4920 NW 79TH AV APT 113

DORAL FL 33166

Mailing address, if different is:

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TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: SALE,SUPPLY,SERVICE AND EXPORT OF INDUSTRIAL EQUIPMET

ARTICLE IV SHARES 1

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ASDRUBAL HURTADO Name and Title: _____

Address 4920 NW 79TH AV Address: _____

APT 113 DORAL FL33166

PRESIDENT

Name and Title: MARGELYS PUERTO Name and Title: _____

Address 4920 NW 79TH AV APT 113 Address: _____

DORAL FL 33166 VICE PRECIDENT-SECRETARY

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

(conti.)

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: MARGELYS PUERTO
Address: 4920 NW 79TH AV APT 113
DORAL FL 33166

ARTICLE VII INCORPORATOR

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

Name: MARGELYS PUERTO
Address: 4920 NW 79TH AV APT 113
DORAL FL 33166

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

Required Signature/Registered Agent

06-17-2014
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

06-17-2014
Date