

P14000056523

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

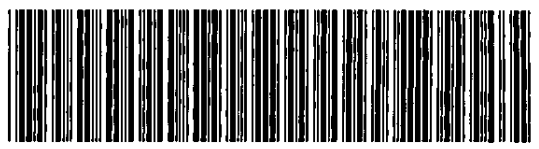
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14 JUN 30 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7/1/14

COVER LETTER

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

SUBJECT: LAS PRIMAS ACCOUNTING 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: GLADIS TOBAR

Name (Printed or typed)

9906 DAVIS RD

Address

TAMPA, FLORIDA 33637

City, State & Zip

323-849-9330

Daytime Telephone number

LASPRIMASINC@HOTMAIL.COM

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 JUN 30 PM 2:30

FILED

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 12, 2014

GLADIS TOBAR
9906 DAVIS ROAD
TAMPA, FL 33637

SUBJECT: LAS PRIMAS, INC.
Ref. Number: W14000036405

REC'D
14 JUN 30 PM 11:19
TALLAHASSEE, FLORIDA

We have received your document for LAS PRIMAS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 614A00012683

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14 JUN 30 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: LAS PRIMAS ACCOUNTING SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

9906 DAVIS RD
TAMPA, FL 33637

Mailing address, if different is:

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE ACCOUNTING SERVICES SUCH AS BOOKKEEPING, PAYROLL, TAXES AND OFFICE RELATED DOCUMENTS

ARTICLE IV SHARES

The number of shares of stock is: 1

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: GLADIS TOBAR / PRESIDENT

Name and Title: _____

Address 9906 DAVIS RD
TAMPA, FLORIDA 33637

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(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:

GLADIS TOBAR

Address:

9906 DAVIS RD

TAMPA, FLORIDA 33637

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

GLADIS TOBAR

Address:

9906 DAVIS RD

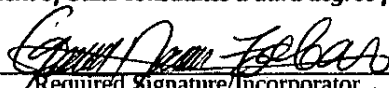
TAMPA, FLORIDA 33637

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

06-25-14
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

06-25-14
Date

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14 JUN 30 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA