

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H15000009419 3)))



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**To:**

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

**From:**

Account Name : BARINAS & ASSOCIATES INC.  
Account Number : I20000000082  
Phone : (305)871-0889  
Fax Number : (305)870-9623

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 JAN 13 AM 11:27

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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

RECEIVED  
15 JAN 13 AM 7:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION  
ARVEN SERVICES, INC.**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

JAN 1 4 2015

S. GILBERT

## COVER LETTER

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

**SUBJECT: ARVEN 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: YANELLE M BARINAS**  
Name (Printed or typed)

**5701 NW 36 ST**  
Address

**MIAMI, FL 33166**  
City, State & Zip

**305-871-0889**  
Daytime Telephone number

**BARINASB@GMAIL.COM**  
E-mail address: (to be used for future annual report notification)

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

FILED

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, 15 JAN 13 AM 11:27

**ARTICLE I NAME**

The name of the corporation shall be:

ARVEN SERVICES, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address

6305 NW 99th Ave

DORAL, FL 33178

Mailing address, if different is:

SAME

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL PURPOSES

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: ALEXANDER R. RANCEL URBINA, PSTD PSTD

Address

6305 NW 99th Ave

Doral, Fl, 33178

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

(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: ALEXANDER R. RANCEL URBINA  
Address: 6305 NW 99th Ave  
Doral, FL, 33178

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: YANELLE M BARINAS  
Address: 5701 NW 36 ST  
MIAMI, 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  
01/12/2015  
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  
01/12/2015  
Date