P15000031637

(Re	questor's Name)	
(Ad	dress)	
————————(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

W1500011667

APR 0 8 2015



800269334598

02/12/15--01004--002 **35.00

02/12/15--01004--001 **35.00

02/12/15--01004--003 **8.75

TO MEN ST AH ID: 57



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 17, 2015

AMAURY MONTES DE OCA 3681 SW 62ND AVE, APT 1101 MIRAMAR, FL 33023

SUBJECT: MONTES DE OCA REFRIGERATION CORP.

Ref. Number: W15000011667

We have received your document for MONTES DE OCA REFRIGERATION CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own incorporator. Please designate the individual whose typed signature appears on the signature line.

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.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 515A00005324

www.sunbiz.org

Division of Cornerations DO ROY 6397 Tellahassas Florida 39314

COVER LETTER

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

Mo SUBJECT:	ontes de Oca Refrigeratio	n Corp.	
SUBJECT:	(PROPOSED COP	RPORATE NAME – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an	original and one (1) copy of	the articles of incorporation ar	nd a check for:
☐ \$70. Filing F	00 \$78.75 The Filing Fee The Certificate of Statu	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	OPY REQUIRED
FROM	Amaury Montes de Oca	Name (Printed or typed)	· · · · · · · · · · · · · · · · · · ·
	3681 SW 62nd Avenue A	•	
	Miramar, Florida 33023	Address	_
		City, State & Zip	
	786-285-3108		
	Day	time Telephone number	
	montesdeocarefrigeration	n@yahoo.com	
	E-mail address: (to	be used for future annual report	notification)

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

in compnance with Chapter out and/or Chapter 021, 1.3. (11011)

The name of the corporat		igeration Corp.
		Mailing address, if different is: 2705 canal RD Miramar FL 33025
ARTICLE III PUR	POSE The pu	urpose of the corporation is to give maintenance
The purpose for which the and repair to refrig	he corporation is organized is:geration equipment for individu	
		တ် မြိန်
ARTICLE IV SHA The number of shares of	RES stock is: 1	•
	•	
ARTICLE V INIT	TIAL OFFICERS AND/OR DIRECT Amaury Montes de Oca, Pre	
	3681 SW 62nd Ave.	Address:
	Apt 1101	
	Miramar, Fl 33023	
Name and Title:		Name and Title:
Address		Address:
Name and Title:		Name and Title:
Address		Address:

Name and	i Title:	Name and Title:	
Address			
11001003	**************************************		
ARTICLE VI	REGISTERED AGENT		
The name and FR	orida street address (P.O. Box NOT a Amaury Montes de Oca	cceptable) of the registered agent is:	
Name:			
Address:	3681 SW 62nd Ave Apt. 110		
	Miramar, Fl 33023		
ARTICLE VII	INCORPORATOR		
The name and ad	dress of the Incorporator is:		
Name:	Amaury Wontes de	. Oca	,
A alalasana	Amaury Upntes de 3681 SW 62nd Ave Apt.	1101	
Address:	Miramar, FI 33023		
	·		
			enoration at the place design
Having been nam	ed as registered agent to accept service	e of process for the above stated co	TOUTHINGS HE INC DINCE NEWS
	ned as registered agent to accept servious im familiar with and accept the appoin		
			to act in this capacity
		stment as registered agent and agree	
this certificate, I a	um familiar with and accept the appoin	atment as registered agent and agree	02 09 20 Date