

P15000072082

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

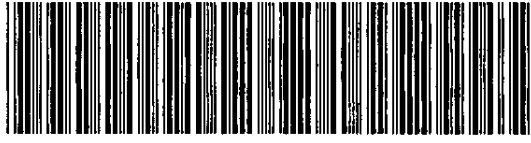
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA
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9/2 a

COVER LETTER

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

SUBJECT: _____ LUIS AP SERVICES CORP.

(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: _____ LUIS ALBERTO PEREZ

Name (Printed or typed)

10 WEST 38TH STREET #12

Address

HIALEAH FL 33012

City, State & Zip

786-223-9854

Daytime Telephone number

luisservicescorp@gmail.com

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 this corporation shall be: LUIS AP SERVICES CORP.

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address <u>10 WEST 38TH STREET #12</u> <u>HIALEAH FL 33012</u>	Mailing address, if different is: _____ _____
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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>LUIS ALBERTO PEREZ</u>	Name and Title: <u>PRESIDENT</u>
Address: <u>10 WEST 38TH STREET #12</u>	Address: _____
<u>HIALEAH FL 33012</u>	_____

Name and Title: <u>THAIS CABALLERO</u>	Name and Title: <u>VICE-PRESIDENT</u>
Address: <u>10 WEST 38TH STREET #12</u>	Address: _____
<u>HIALEAH FL 33012</u>	_____

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

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: LUIS ALBERTO PEREZ
Address: 10 WEST 38TH STREET #12
HIALEAH FL 33012

ARTICLE VII INCORPORATOR

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

Name: LUIS ALBERTO PEREZ
Address: 10 WEST 38TH STREET #12
HIALEH FL 33012

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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
08/17/2015
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
08/17/2015
Date