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Florida Department of State

Division of Corporations

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**FLORIDA PROFIT/NON PROFIT CORPORATION
SAN GABRIEL MULTISERVICES INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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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: **SAN GABRIEL MULTISERVICES INC**

ARTICLE II PRINCIPAL OFFICE

Principal Street Address: **3800 S OCEAN DR APT 603**

HOLLYWOOD, FL. 33019

Mailing Address if different is:

ARTICLE III PURPOSE

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

ARTICLE IV

The number of shares of stock is: **100 SHARES**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **ALMA R BARRAGAN SANTIAGO-P**

Address: **3800 S OCEAN DR APT 603**

HOLLYWOOD, FL. 33019

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

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

Name: **ALMA R BARRAGAN SANTIAGO**

Address: **3800 S OCEAN DR APT 603**

HOLLYWOOD, FL. 33019

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ALMA R BARRAGAN SANTIAGO

Address: 3800 S OCEAN DR APT 603

HOLLYWOOD, FL 33019

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

X 

Required Signature/Registered Agent

10-26-15

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

X 

Required Signature/Incorporator

10-26-15

Date

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