

P16000047436

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
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From: Account Name : TRAMILEX LLC
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**FLORIDA PROFIT/NON PROFIT CORPORATION
ISV SERVICES CORP**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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TALLAHASSEE FLORIDA

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COVER LETTER

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

SUBJECT: ISV 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: INDIRA SANTANA

Name (Printed or typed)

2263 SW 37th AVE APT 318

Address

MIAMI, FL 33145

City, State & Zip

(786)603-1834

Daytime Telephone number

santanaindirs85@yahoo.com

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

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

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FILED

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

16 MAY 31 PM 3:26

ARTICLE I NAME

The name of the corporation shall be: ISV SERVICES CORP

SECRETARY OF STATE
TALLAHASSEE FLORIDA**ARTICLE II PRINCIPAL OFFICE**Principal street address

2263 SW 37th AVE APT 318

Mailing address, if different is:

SAME ADDRESS

MIAMI, FL 33145

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: INDIRA SANTANA VAZQUEZ, P

Name and Title: _____

Address

2263 SW 37th AVE APT 318

Address: _____

Miami, FL 33145

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

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

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: INDIRA SANTANA VAZQUEZ
Address: 2263 SW 37th AVE APT 318
Miami, FL 33145

16 MAY 31 PM 3:26
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

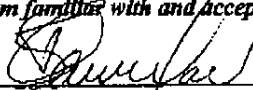
Name: ERIK GONZALEZ
Address: 8660 W FLAGLER ST STE 207
MIAMI, FL 33144

ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: 05/31/2016 (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

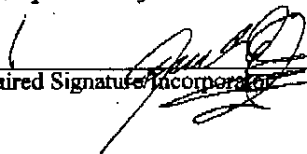


Required Signature/Registered Agent

05/31/2016

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

05/31/2016

Date

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