

P170000/8332

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

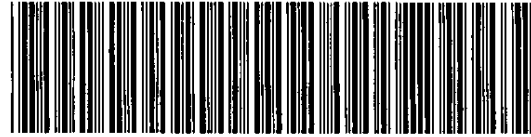
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE 03/10/17

03/01/17

February 25, 2017

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

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TALLAHASSEE, FLORIDA

Re: P14000043441

To whom it may concern:

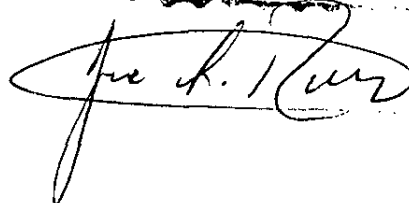
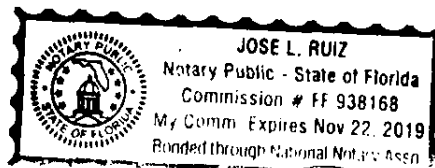
By means of this letter I am advising that I have no intentions of re-instating the above mentioned dissolved corporation.

Should you have any questions or concerns please do not hesitate to contact me.

Sincerely,



Joan C. Tundidor



**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: ALL IN ONE CUSTOMER SERVICE CENTER INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

1520 SW 86 COURT

MIAMI FLORIDA 33144

Mailing address, if different is:

7750 SW 117TH AVE SUITE 201D

MIAMI FLORIDA 33183

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LEGAL PURPOSES

**ARTICLE IV SHARES**

The number of shares of stock is: 100 @ \$1.00 EA

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

Name and Title: TUNDIDOR, JOAN C PRES Name and Title: \_\_\_\_\_

Address 1520 SW 86 COURT Address: \_\_\_\_\_

MIAMI FLORIDA 33144 \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: JOAN C TUNDIDOR

Address: 1520 SW 86 COURT

MIAMI FLORIDA 33144

**ARTICLE VII INCORPORATOR**

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

Name: JOAN C TUNDIDOR

Address: 1520 SW 86 COURT

MIAMI FLORIDA 33144

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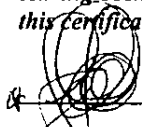
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 03/10/2017. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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*

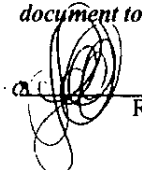


\_\_\_\_\_  
Required Signature/Registered Agent

02/25/2017

\_\_\_\_\_  
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

02/25/2017

\_\_\_\_\_  
Date