Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000148882 3)))



H170001468823ABC6

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 120000000146 Phone : (305)444-4994 Fax Number : (305)444-4977

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		

FLORIDA PROFIT/NON PROFIT CORPORATION ATC MOBILE SERVICES INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

N. SAMS JUN 05 2017

CEIVED

-2 PM 2: 04

-1 CORP DRATIONS

OF COMPERCIAL

ATION SERVICES

Elegionic Filing Menu

Corporate Filing Menu

Help

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

	ME ATC MOBILE SERVICES poration shall be:			
Principal street address		Mailing address, if different is:		
)50 NW 103RD S	Г 108	8992 NW 113 ST Waleah Gardens, FL 33018		
ialeah garde	NS, FL 33016			
RTICLE III PUL De purpose for whi	RPOSE ch the corporation is organized is:	D ALL LAWFUL BUSINESS		
			17 JUN	
RTICLE IV SH.	4RES of stock is:		N-2 NASSEE, I	
	TIAL OFFICERS AND/OR DIRECTORS Title: ADDYS TOLEDO CHINEA (P)	Name and Title:	8: 00 STATE FLORIE	
Address	8992 NW 113 ST	A d d		
	HIALEAH GARDENS, FL 33018			
-			<u>.</u>	
Name and Ti	tle:	Name and Title:		
		A Advan.		
Address		Address:		
Address				
Address	ile:			
Address		Name and Title:		

Name and Title:		Name and Title:	
Address		Address:	
			
	REGISTERED AGENT		
The name and	Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	ADDYS TOLEDO CHINEA		
Address:	8992 NW 113TH ST		
	HIALEAH GARDENS, PL 33018		ALC:
ADTICLE WIL	ALCONDON ATOR		
ARTICLEVII	INCORPORATOR		SSS ~
The name and	address of the Incorporator is:		SECTION
Name;	ADDYS TOLEDO CHINEA		
Address:	8992 NW 113TH ST		LOSTAL STAL STAL STAL STAL STAL STAL STAL
	HIALEAH GARDENS, FL 33018		Ori O
	** EFFECTIVE DATE: If other than the date of filing:	(OPTIONA)	T \
	date is listed, the date must be specific and ca	nnot be more than five days	prior or 90 days after the
Note: If the dat	te inserted in this block does not meet the applica	ble statutory filing requiremen	nts, this date will not be listed as
the document's	effective date on the Department of State's recor	ds.	
, iku, k			
Having been na this certificate, 1	imed as registered agent to accept service of pro Tam familiar with and accept the appointment as	cess for the above stated corpe registered agent and agree to	oration at the place designated in act in this capacity
\sim	dudo.		6/1/2017
	Required Signature/Registered Agent		Date
I submit this do document to the	cument and affirm that the facts stated herein a Department of State constitutes a third degree fe	are true. I am aware that the clony as provided for in s.817.1	false information submitted in a 155, F.S.
and a	Provido		6/1/2017
Requ	ired Signature/Incorporator	··	Date