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Division of Corporations

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Account Number : I20000000019 Phone : (305)552-5973

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FLORIDA PROFIT/NON PROFIT CORPORATION RIM REPLACE CORP

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

Florida Department of State

Attention: New Filings Section

To whom it may concern:

This is to advise you that the owners of ________ Plo00002787 _____ are the same owners of the attached articles of incorporation. We have dissolved the company and have no intention of reopening it. Thank you for your help in this matter.

Very Sincerely,

Renier banez

12, 63, 2313 13, 33

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

The name of the corpora	RIM REPLA	CE CORP	
ARTICLE II PRIN	<u>CIPAL OFFICE</u> Principal <u>street</u> address	Mailing ad 10835 SW 154 TBR	dress, if different is:
MAMI, FL 33157		MIAMI, PL 33157	•
ARTICLE III PURP. The purpose for which	OSE the corporation is organized is:	R CONDITIONING REPAIR	
			<u> </u>
	ES 100 slock is:		AM 8: 17
		Nome and Title:	
Address	PRESIDENT	Address:	
	10835 SW 154 TERR MIAMJ, FL 33157		
Name and Title:		Name and Title:	
Address		Address:	
			
Name and Title:		Name and Title:	
Address		Address:	

Name	and little:	Name and Title;	
Addre		Address:	
The name and	REGISTERED AGENT Florida street address (P.O. Box NOT accepta RENIER IBANEZ	ble) of the registered agent is	:
Name:	10835 SW 154 TERR		
Address:	MIAMI, PL 33157		
ARTICLE YII	INCORPORATOR		
The name and :	address of the Incorporator is:		
Name;	RENIER MANEZ		·
Address:	10835 SW 154 TERR	.	
	MTAMI, FL 33157		•
Effective date, i	EFFECTIVE DATE: 02/09/2018 If other than the date of filing: date is listed, the date must be specific and c	OPTIO . (OPTIO	NAL) nys prior or 90 days after the
Note: If the dat	e inserted in this block does not meet the applic effective date on the Department of State's reco	able statutory filing require rds.	ments, this date will not be listed as
Having been na this certificate, l	uned as registered agent to accept service of pr an familiar with and accept the oppointment t	ocess for the above stated cost registered agont and agree	orporation at the place designated i e to act in this capacity
موستاند			02/09/2018
-	Required Signature/Registered Agent		Date
I submit this do document to the	cument and affirm that the facts stated herein Department of State constitutes a third degree	are true. I am aware that Glony as provided for in s.8	the false information submitted in . 17.155, P.S.
			02/09/2018
Reco	irea-Signature/Incorporator		Date