

P18000019734

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

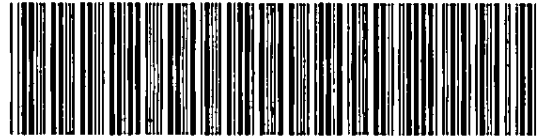
Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Ruby International of Miami 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: Payroll & Tax Services

Name (Printed or typed)

2100 W 76 Street Suite 408

Address

Hialeah, FL 33016

City, State & Zip

786-401-7873

Daytime Telephone number

Payroll_Tax_Service@outlook.com

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

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

Ruby Moreno

1800 NE 114 Street Suite 2107

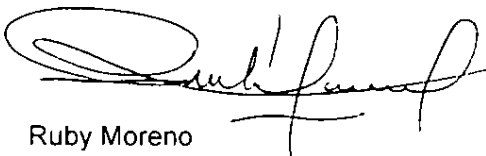
N MIAMI, FL 33181

To whom it may concern;

I Ruby Moreno, president of Ruby International of Miami Corp. (Document # P16000016243) will not be renewing above corporation for 2017 or 2018. I am asking The Florida Department of Corporation to dissolve Ruby International of Miami Corp. (Document # P16000016243). I would like to reopen a new corporation under the same name as per attached documents.

Should you have any question please contact me at the 786-385-5252.

Sincerely



Ruby Moreno

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TALLAHASSEE, FLORIDA

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: Ruby International of Miami Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1800 NE 114 St Apt 2107

North Miami, FL 33181

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all legal services

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ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Moreno, Ruby - President

Name and Title:

Address

1800 NE 114 St Apt 2107

Address:

North Miami, FL 33181

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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

ARTICLE VI REGISTERED AGENT

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

Name: Moreno, Ruby
Address: 1800 NE 114 St Apt 2107
North Miami, FL 33181

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ARTICLE VII INCORPORATOR

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

Name: Payroll and Tax Services
Address: 2100 W 76 St Suite 408
Hialeah, FL 33016

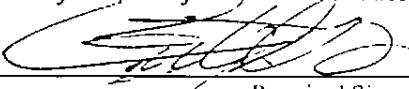
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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.

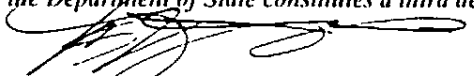
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

2/14/18
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

2/14/18
Date