

Florida Department of State

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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.

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : SERVICELL WIRELESS REPAIR CENTER, CORP.
Account Number : I20160000091
Phone : (305)635-9694
Fax Number : (305)635-9868

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

Email Address: jjervigen@yahoo.com

FLORIDA PROFIT/NON PROFIT CORPORATION
GUILLERMO BODY SHOP CORPORATION

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

SECRETARY OF STATE
TALLAHASSEE, FL

2018 SEP 10 PM 4:27

FILED

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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:

Guillermo Body Shop Corporation**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

15565 NW 157 St RdMiami Gardens, FL 33054**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: P. Guillermo Orellana Paderno Name and Title:

Address

15565 NW 157 St Rd

Address:

Miami Gardens, FL 33054

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: Guillermo Orellana Perdomo
Address: 15565 NW 157 St Rd
Miami Gardens, FL 33054

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Guillermo Orellana Perdomo
Address: 15565 NW 157 St Rd
Miami Gardens, FL 33054

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

Guillermo Orellana Perdomo
Required Signature/Registered Agent

09/10/18
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.

Guillermo Orellana Perdomo
Required Signature/Incorporator

09/10/18
Date

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