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\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

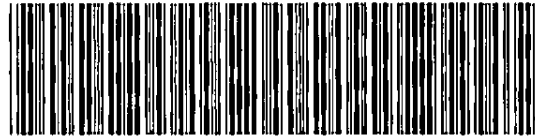
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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OCT 17 2018

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CLERK OF STATE  
DIVISION OF CORPORATIONS  
OCT 17 AM 10:11

## COVER LETTER

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

**SUBJECT:** WATERWAX INC

(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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

**FROM:** MILUSKA BERROCAL  
\_\_\_\_\_  
Name (Printed or typed)  
  
15463 SW 86 TERRACE  
\_\_\_\_\_  
Address  
  
MIAMI FL 33193  
\_\_\_\_\_  
City, State & Zip  
  
305-519-6768  
\_\_\_\_\_  
Daytime Telephone number  
  
2GB.MBERROCAL@GMAIL.COM  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

FILED  
DEPT. OF STATE  
DIVISION OF CORPORATIONS  
NOV 17 AM 11

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

**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: WATERWAX INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

2425 W 76ST APT 206

HIALEAH FL 33016

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: FOR ALL AND ANY LWAFULL ACTIVITY

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

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

Name and Title: STEVENS ORTIZ - PRESIDENT

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

Address 2425 W 76ST APT 206

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

HIALEAH FL 33016

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

FILED  
18 OCT 17 AM 10:14  
DIVISION OF CORPORATE AFFAIRS

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: STEVENS ORTIZ \_\_\_\_\_

Address: 2425 W 76ST APT 206 \_\_\_\_\_

HIALEAH FL 33016 \_\_\_\_\_

**ARTICLE VII INCORPORATOR**

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

Name: STEVENS ORTIZ \_\_\_\_\_

Address: 2425 W 76ST APT 206 \_\_\_\_\_

HIALEAH FL 33016 \_\_\_\_\_

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 10/08/2018 (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

10/08/2018  
\_\_\_\_\_  
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

10/08/2018  
\_\_\_\_\_  
Date

October 08, 2018

P18 000085432

FLORIDA DEPARTMENT OF STATE  
New Filing Section  
Division of Corporation  
PO BOX 6327  
TALLAHASSEE, FL 32314

Ref: WATERWAX LLC.  
NO reinstatement - Release of Entity Name  
Filing New Articles of Incorporation

Dear Sirs:

WATERWAX LLC. (Document Number L17000105363) did not file its 2018 Annual Report and the entity appears as Inactive "Admin Dissolution for Annual Report". We will not reinstate the entity and we are releasing its name to be used. Consequently, we are registering WATERWAX INC under the same characteristics. Please find Articles of Incorporation and payment attached.

We apologize for the inconvenience. If you have any question, please contact us at 305-479-0398

Thanks again for your help.

Sincerely,



**STEVENS ORTIZ**  
President  
WATERWAX INC.

18 SEP 17 AM 11:51  
DIVISION OF CORPORATION  
FLORIDA DEPARTMENT OF STATE