

# P19000029165

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

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

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

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

☐ PICK-UP

☐ WAIT

☐ MAIL

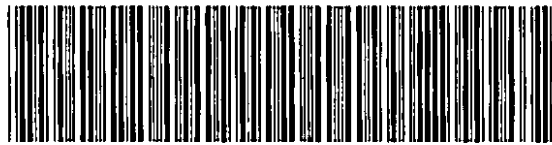
\_\_\_\_\_  
(Business Entity Name)

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

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

Special Instructions to Filing Officer:

Office Use Only



800326853668

03/28/19--01010--004 \*\*70.00

## COVER LETTER

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

SUBJECT: Silva Premium Service 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 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: Maria E. Ruiz  
Name (Printed or typed)

7750 S.W. 117 Ave Suite 201D  
Address

Miam. Florida 33183  
City, State & Zip

305-595-2407  
Daytime Telephone number

mariagueros9@hotmail.com  
E-mail address: (to be used for future annual report notification)

**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: Silva Premium Service Inc.

## ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

14512 S.W. 10 Street

7750 S.W. 117 Ave Suite 2010

Miami, Florida 33184

Miami Florida 33183

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any and all legal purpose

## ARTICLE IV SHARES

The number of shares of stock is: 100 C. \$1.00 ea.

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Oscar H. Silva Pres

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

Address 14512 S.W. 10 St.

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

Miami, Florida 33184

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: Oscar H. Silva

Address: 14512 S.W. 10 Street  
Miami, Florida 33184

**ARTICLE VII INCORPORATOR**

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

Name: Oscar H. Silva

Address: 14512 S.W. 10 Street  
Miami, Florida 33184

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 04/10/19 (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.)

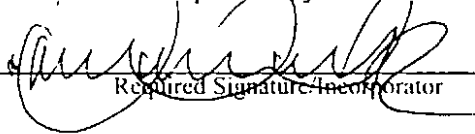
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

3/25/19  
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

3/25/19  
Date

March 19, 2019

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

Re: SILVA PREMIUM SERVICES INC

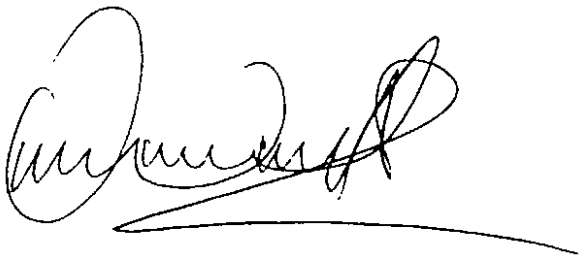
To whom it may concern:

By means of this letter I am advising that I have no intentions of re-instating the above mentioned dissolved corporation.

Should you have any questions or concerns please do not hesitate to contact me.

Sincerely,

Oscar Silva

A handwritten signature in black ink, appearing to read 'Oscar Silva', with a long horizontal flourish extending to the right.