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Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
PORRO SERVICES CORP**

Certificate of Status	0
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Page Count	01
Estimated Charge	\$70.00

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MAY 01 2019

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COVER LETTER

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

SUBJECT: PORRO SERVICES 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: Roberto Toledo Porro
Name (Printed or typed)
9365 SW 44th ST
Address
Miami, FL 33165
City, State & Zip
(305)574-1478
Daytime Telephone number
halfmestudent@gmail.com
E-mail address: (to be used for future annual report notification)

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

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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: PORRO SERVICES CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

9365 SW 44th ST

Miami, FL 33165

Mailing address, if different is:

SAME ADDRESS

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: ROBERTO TOLEDO PORRO, P Name and Title: _____

Address: 9365 SW 44th ST Address: _____

Miami, FL 33165 _____

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 AGENT

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

Name: ROBERTO TOLEDO PORRO
Address: 9365 SW 44th ST
Miami, FL 33165

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ERIK GONZALEZ
Address: 8660 W FLAGLER ST STE 207
MIAMI, FL 33144

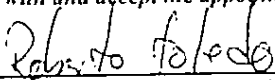
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 05/13/2019. (OPTIONAL)

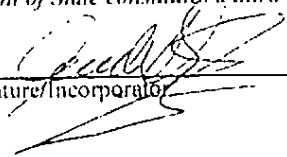
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

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

 05/13/2019
Required Signature/Registered Agent 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.

 05/13/2019
Required Signature/Incorporator Date