

**P19 000 076 487**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : FLORIDA MULTISERVICES, INC.  
Account Number : I20150000061  
Phone : (786)290-3319  
Fax Number : (305)645-2035

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

Email Address: flmultiservices@yahoo.com

**FLORIDA PROFIT/NON PROFIT CORPORATION  
C. NUNEZ CORPORATION**

Certificate of Status	0
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Corporate Filing Menu

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OCT 11 2019

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## COVER LETTER

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

SUBJECT: C. NUNEZ CORPORATION  
(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: ERIKCH NUNEZ  
Name (Printed or typed)  
135 EAST 9TH STREET APT #6  
Address  
HALEAH, FL 33010  
City, State & Zip  
786-259-4816  
Daytime Telephone number  
flmultiservices@yahoo.com  
E-mail address: (to be used for future annual report notification)

**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** C. NUNEZ CORPORATION  
The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address Mailing address, if different is:  
135 EAST 9TH STREET APT #6 SAME  
HIALEAH, FL 33010

**ARTICLE III PURPOSE** ANY AND ALL LAWFUL BUSINESS  
The purpose for which the corporation is organized is: \_\_\_\_\_

**ARTICLE IV SHARES** ONE HUNDRED SHARES NO PAR VALUE  
The number of shares of stock is: \_\_\_\_\_

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

Name and Title:	ERIKCH NUNEZ, PRESIDENT	Name and Title:	_____
Address	135 EAST 9TH STREET	Address:	_____
	APT #6		_____
	HIALEAH, FL 33010		_____

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: ERIKCH NUNEZ  
Address: 135 EAST 9TH STREET APT # 6  
HIALEAH, FL 33010

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


Name: ERIKCH NUNEZ  
Address: 135 EAST 9TH STREET APT # 6  
HIALEAH, FL 33010

**ARTICLE VIII EFFECTIVE DATE:**

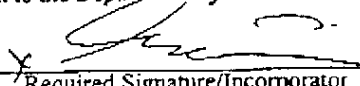
Effective date, if other than the date of filing: 10/10/2019 (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**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*

 10/10/2019  
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.*

 10/10/2019  
Required Signature/Incorporator Date

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C. NUNEZ CORPORATION  
135 EAST 9<sup>TH</sup> STREET  
APT #6  
HIALEAH, FL 33010  
Phone: 786-259-4816

October 10, 2019

FILED  
19 OCT 13 PM 10:45  
CLERK OF COURT  
STATE OF FLORIDA

FLORIDA DEPARTMENT OF STATE


Attention: New Filings Section

TO WHOM IT MAY CONCERN:

This is to advise you that the owner of C. NUNEZ CORPORATION., Document No. P05000052591 is the same owner of the attached articles of incorporation. I have dissolved the company on September 27, 2019 and have no intent of reopening it.

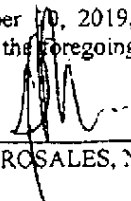
Thank you for your help in this matter,

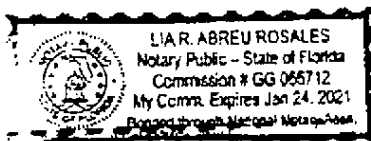
Sincerely yours,

  
Erikch Nunez

STATE OF FLORIDA )  
COUNTY OF MIAMI-DADE )

BEFORE ME, the undersigned authority, on October 10, 2019, appeared ERIKCH NUNEZ, who is personally known to me, and acknowledged that she executed the foregoing instrument for the purposes expressed therein.

  
LIA R. ABREU ROSALES, NOTARY PUBLIC, State of Florida



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