19000 80474

(Requestor's Name)				
(Add	dress)			
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(City	y/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bus	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

M190000 59537

OST 2 9 STB T. SCOTT



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05/24/19--01025--005 ++70.00

TALL AHASSEEL STORIDA



July 10, 2019

MARIA E RUIZ 7750 SW 117TH AVE SUITE 201D MIAMI, FL 33183

SUBJECT: J M G GUEVARA SERVICES INC

Ref. Number: W19000059537

We have received your document for J M G GUEVARA SERVICES INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

P17000033575-JMG GUEVARA SERVICES SERVICES INC

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 819A00013890

COVER LETTER

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

SUBJECT: TM (G GUEVARA SERVICES INC				
	(PROPOSEĎ CÓRPOR	NTE NAME – <u>MUST INCL</u> I	JDE <u>SUFFIX</u>)		
Enclosed are an o	original and one (1) copy of the ar	ticles of incorporation and	l a check for:		
S70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status		
		ADDITIONAL CO	PY REQUIRED		
FROM:	MARIA E RUIZ	e (Printed or typed)			
7	7750 SW 117TH AVE SUITE 201D				
	Address				
į.	MIAMI FLORIDA 33183				
-	City, State & Zip				
3	305 595-2407				
-	Daytime ²	Telephone number			
N	MARIAQUIROS9@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)

RTICLE II PRIN	Principal street address	Mailing address, if different is:		
MIAMI FLORIDA 33193		7750 SW 117TH AVE SUITE 201D MIAMI FLORIDA 33183		
			Frenc 1887	
RTICLE IV SHAR ne number of shares of RTICLE V INITL	AL OFFICERS AND/OR DIRECTORS		E. F. O.	
RTICLE V INITE Name and Title	AL OFFICERS AND/OR DIRECTORS JOSE GUEVARA, PRESIDENT e:	Name and Title	JUAN R. GUEVARA , VP	
RTICLE V INITL	AL OFFICERS AND/OR DIRECTORS JOSE GUEVARA PRESIDENT	Name and Title Address:	IUAN R GUEVARA VP	
RTICLE V INITL Name and Titl	AL OFFICERS AND/OR DIRECTORS E 9000 SW 122 PLACE APT 302	-	JUAN R. GUEVARA , VP 9000 SW 122 PLACE APT 302	
Name and Titl Address	AL OFFICERS AND/OR DIRECTORS E 9000 SW 122 PLACE APT 302	Address: 	JUAN R. GUEVARA , VP 9000 SW 122 PLACE APT 302 MIAMI FLORIDA 33186	
Name and Titl Address	AL OFFICERS AND/OR DIRECTORS JOSE GUEVARA, PRESIDENT 9000 SW 122 PLACE APT 302 MIAMI FLORIDA 33186	Address: Name and Title	JUAN R. GUEVARA , VP 9000 SW 122 PLACE APT 302 MIAMI FLORIDA 33186	
Name and Title Address Name and Title	AL OFFICERS AND/OR DIRECTORS JOSE GUEVARA, PRESIDENT 9000 SW 122 PLACE APT 302 MIAMI FLORIDA 33186	Address: Name and Title Address:	JUAN R. GUEVARA , VP 9000 SW 122 PLACE APT 302 MIAMI FLORIDA 33186	
Name and Title Address Name and Title Address	AL OFFICERS AND/OR DIRECTORS JOSE GUEVARA, PRESIDENT 9000 SW 122 PLACE APT 302 MIAMI FLORIDA 33186	Address: Name and Title Address:	JUAN R. GUEVARA , VP 9000 SW 122 PLACE APT 302 MIAMI FLORIDA 33186	

Name a	nd Title:	Name and Title:	
Addres	ss	Address:	
			
ARTICI F VI	REGISTERED AGENT		
	Florida street address (P.O. Box NOT acceptable) of the registered agent is:	
Name:	JOSE GUEVARA		
Address:	9000 SW 122 PLACE APT 302		
	MIAMI FLORIDA 33186		
ARTICLE VII	<u>INCORPORATOR</u>		
The name and a	address of the Incorporator is:		
Name:	JOSE GUEVARA		
Address:	9000 SW 122 PLACE APT 302		
	MIAMI FLORIDA 33186		
ARTICLE VIII Effective date, i (If an effective filing.)	EFFECTIVE DATE: If other than the date of filing: date is listed, the date must be specific and can	19 . (OPTION) inot be more than five days	AL) s prior or 90 days after the
	te inserted in this block does not meet the applicate effective date on the Department of State's record		ents, this date will not be listed as
Having been na this certificate, I	amed as registered agent to accept service of proc I am familiar with and accept the popointment as	ess for the above stated corp registered agent and agree t	poration at the place designated in o act in this capacity
λ	Required Signature/Registered Agent		10/9/19
	Required Signature/Registered Agent		Date
	ocument and affirm that the facts stated herein a ! Department of State constitutes a third degree fe		
d			10/9/19
Requ	uired Signature/Incorporator		Date

10/9/19

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

Re: J M G GUEVARA 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,

Jose Guevara

