

P20000023290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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T. SCOTT



400340895204

03/04/20--01015--000 \$70.00

2021 MAR -4 AM 10:40
11:00

COVER LETTER

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

SUBJECT: _____
(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: _____ NOEL TAVIO
Name (Printed or typed)

_____ 436 PALM AVE
Address

_____ HIALEAH, FL 33010
City, State & Zip

_____ (305)904-3063
Daytime Telephone number

_____ 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: S & J DADE SERVICES, INC

ARTICLE II PRINCIPAL OFFICE

Principal **street** address

Mailing address, if different is:

610 E 45TH STREET

HIALEAH, FL 33013

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ANY AND LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SERGIO IZQUIERDO P Name and Title: _____

Address 610 E 45TH STREET Address: _____

HIALEAH, FL 33013 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

2020 MAR - 4
AM 10:43
FILED

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: SERGIO IZQUIERDO

Address: 610 E 45TH STREET

HIALEAH, FL 33013

ARTICLE VII INCORPORATOR

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

Name: SERGIO IZQUIERDO

Address: 610 E 45TH STREET

HIALEAH, FL 33013

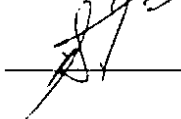
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

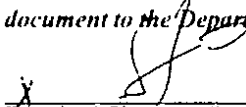


Required Signature/Registered Agent

2/21/20

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

2/21/20

Date

CONSENT LETTER

FEBRUARY 21, 2020

I, SERGIO IZQUIERDO PRESIDENT OF A CORPORATION NAMED S & J DADE SERVICES. INC DOCUMENT NUMBER P16000031667 INFORMS THE FOLLOWING: THAT THE ABOVE MENTIONED CORPORATION WAS DISSOLVED ON 09/27/2019 FOR NOT FILING ANNUAL REPORT. I DON'T WANT TO REACTIVE THIS CORPORATION. THEREFORE RELEASING THE NAME. AT THE SAME TIME I WANT TO USE SAME NAME FOR A NEW FLORIDA CORPORATION. ENCLOSED PLEASE FIND DOCUMENTS AND CASHIER CHECK TO FILE NEW CORPORATION.

A handwritten signature in black ink, appearing to be 'S. Izquierdo', written in a cursive style.

SERGIO IZQUIERDO
PRESIDENT