P2000004FG12

(Re	equestor's Name)	
(Ac	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	? #)
PICK-UP	WAIT	MAIL
(Bi	usiness Entity Nan	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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TO

COVER LETTER

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

SUBJECT:	(PROPOSED CORPORA	vices Corp	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
	_		
⊠ \$70.00	□ \$78.75	\$78.75	☐ \$87.50
Filing Fee	Filing Fee	Filing Fee	
	& Certificate of Status	& Certified Copy	& Certificate of
			Status
		ADDITIONAL CO	PY REQUIRED
FROM:	Maria E. Ruiz		
1 KOM	Nam	e (Printed or typed)	
	7756 SW. 1	17 Ave + 2010	
		Address	
	Miami, f	5(33183 , State & Zip	
-	City	, State & Zip	
	4		
	305 - 595 - :	740')	
	•	l'elephone number	
	Mariagilir	59e hot mail co	m
	E-mail address: (to be use	os 90 hot mail. co	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)

LE II PRINCIP	AL OFFICE				
	incipal street address		Mailing address, if different is:		
14263 50	: 180 Tour		7750 SU 117 Ac 11-7 201		
	corida 33177		Miani	Florida	33182
•					
rpose for which the	<u>E</u> corporation is organized is: _	any an	1 all	egal pur	pose
		·		r	
				-	
. <u>-</u>					
			<u>_</u>		
					
		**			1=
	ock is: 100 C + 1.0				
nber of shares of sto	ock is: 100 C 71.0	CTORS	and Title:		
nber of shares of store **LE V INITIAL** Name and Title:_	OFFICERS AND/OR DIRE	CTORS Pres. Name			
nber of shares of sto LE V INITIAL Name and Title: Address	OFFICERS AND/OR DIRE Yusimi fedraza 14263 S.U. 180	Pres. Name			
The V INITIAL Name and Title: Address	OFFICERS AND/OR DIRE Yusimi fe draza	Pres. Name			
nber of shares of sto LE V INITIAL Name and Title: Address	OFFICERS AND/OR DIRE Yusimi fedraza 14263 S.U. 180	Pres. Name			
nber of shares of sto LE V INITIAL Name and Title: Address	OFFICERS AND/OR DIRE Yusimi fe draza, 14263 S. U. 180	CTORS Pres. Name Terr Address	ess:		2020 JUN 20168 20168
nber of shares of sto LE V INITIAL Name and Title: Address - Name and Title:	OFFICERS AND/OR DIRE Yusimi Pedraza, 14263 S. U. 180	Pres. Name Terr Addres 3177	ess: e and Title:		
nber of shares of sto LE V INITIAL Name and Title: Address - Name and Title:	OFFICERS AND/OR DIRE Yusimi fe draza, 14263 S. U. 180	Pres. Name Terr Addres 3177	ess: e and Title:		2020 JUN 23
nber of shares of sto LE V INITIAL Name and Title: Address - Name and Title:	OFFICERS AND/OR DIRE Yusimi Pedraza, 14263 S. U. 180	Pres. Name Terr Addres 3177	ess: e and Title:		2020 JUN 23 AM
nber of shares of sto LE V INITIAL Name and Title: Address - Name and Title:	OFFICERS AND/OR DIRE Yusimi Pedraza, 14263 S. U. 180	Pres. Name Terr Addres 3177 Name Addres Addres	ess: e and Title:		2020 JUN 23 AM 10: 5
nber of shares of sto LE V INITIAL Name and Title: Address - Name and Title:	OFFICERS AND/OR DIRE Yusimi fedraza, 14263 S. U. 180 M. Gm; Florida.	Pres. Name Terr Addres 3177 Name Addres Addres	ess: e and Title:		2020 JUN 23 AM IO:
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Name and Titl	e:	Name and Title:	
Address		Address:	
		_	
ARTICLE VI REGI	ISTERED AGENT a street address (P.O. Box NOT acceptable) o	of the registered agent is:	
Name:	Yusimi Pedraza	_	
Address:	14263 S.W. 180 Terr Miani Florida 33177	_	
	miani Florida 33177	_	(n
ARTICLE VII <u>INC</u> O	-		ZUZU JUN 23 AM 10: 59 SEUR JANASSEE FL
The <u>name and addres</u>	s of the Incorporator is:		W 23
	Yusim. Pedraza		SS: R
	14263 SW. 180 Ferr		
	Mian. Florid, 33177	_	· · •
ARTICLE VIII EFI Effective date, if other (If an effective date is filing.)	FECTIVE DATE: than the date of filing: 6 25 2020 s listed, the date must be specific and cann	O (OPTIONAL not be more than five days p	_) prior or 90 days after the
Note: If the date inser	rted in this block does not meet the applicabl ve date on the Department of State's records		nts, this date will not be listed as
Having been named as certificate, I am famili	s registered agent to accept service of process ar with and accept the appointment as registe	for the above stated corporat ered agent and agree to act in	tion at the place designated in this rethis capacity
Jumen			6/10/2020
(,	Required Signature/Registered Agent		Date
I submit this documen document to the Depar	nt and affirm that the facts stated herein are etment of State constitutes a third degree felo	e true. I am aware that the ny as provided for in s.817.1.	false information submitted in a 55, F.S.
Lucie	پ		1/10/2020
Required Signature/In	corporator		Date