

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
RAMSY RAMIREZ SERVICES INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

2020 DEC 23 PM 1:17

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

Effective Date 4/1/21

ARTICLE I NAME: The name of the corporation is:

Ramsy Ramirez Services Inc.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

12731 SW 65 ST Miami FL 33183

ARTICLE III SHARES: The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

Ramsy Ramirez, (CP)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Ramsy Ramirez


12731 SW 65 St Miami FL
33183**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

Ramsy Ramirez

12731 SW 65 St Miami FL
33183

Required Signatures:

Having been named as registered agent to accept service of process for the above state corporation at the place designated in this certificate, I am familiar with and accept appointment as registered agent and agree to act in this capacity



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 third degree felony as provided for in s.817.155, F.S.



Incorporator_____
Date