

P21000062489

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

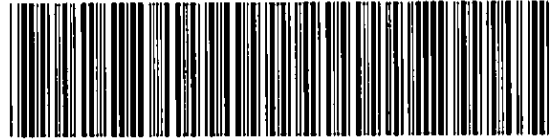
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100368681551

07/06/21--01004--018 **70.00

RECEIVED

2021 JUL -6 PM 12:15

RECEIVED
2021 JUL -6 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: S & S CUSTOM ADVISORY CORP.
(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: Francia Hernandez
Name (Printed or typed)

5077 NW 114 Path
Address

Doral, FL. 33178
City, State & Zip

(786) 246- 9615
Daytime Telephone number

poldan@labor-international.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)

ARTICLE I NAME

The name of the corporation shall be: S & S Custom Advisory Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5077 NW 114 Path

Doral, FL, 33178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: All legal business matters related to custom advisory and courier services

ARTICLE IV SHARES

The number of shares of stock is: 100 Common Stocks at \$10.00 per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Francia Hernandez, President

Name and Title: _____

Address 5077 NW 114 Path

Address: _____

Doral, FL, 33178

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FL

2021 JUL -6 PM 3:58

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: Pily C Roldan

Address: 5077 NW 114 Path

Doral, FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Francia Hernandez

Address: 5077 NW 114 Path

Doral, FL 33178

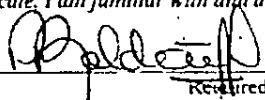
ARTICLE VIII EFFECTIVE DATE:

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

6/18/2021
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

Date 6/18/2021