Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

**Electronic Filing Cover Sheet** 

(((H21000365313 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

: YOUR DREAM SERVICES CORP. Account Name

Account Number : I20200000137

: (786)660-0108

Fax Number

: (786)364-1047

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

Email Address: info@yourdreamms.com

## FLORIDA PROFIT/NON PROFIT CORPORATION

## Advance Project Corp

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

(H210003653133)

Page: 3 of 5

2021-10-01 16:19:45 GMT

17863641047

From: your dream

## **COVER LETTER**

(H210003653133)

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

SUBJECT: Adv	ance Project Corp (PROPOSED CORPOR)	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	l a check for:
⊠ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certified Copy & Certificate of
		ADDITIONALCO	PY REQUIRED
FROM:		niel Moncada Sanchez ne (Printed or typed)	
_	2810 Nw 181st Street Address		
_	<u>Miami G</u> City	ardens, Florida 33056 , State & Zip	
_	305- Daytime	333-8164 Telephone number	
	construction E-mail address: (to be use	floorsid@gmail.com ed for future annual report i	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)

(H21000365313.3)

name of the corp				
TCLE II PR	INCIPAL OFFICE			
Principal <u>street</u> address 2810 Nw 181st Street		Mailing address, if different is:		
	orida 33056			_
TCLE III PU purpose for whi	RPOSE ch the corporation is organized is: <u>Service s</u>	of Construction, pai	nting, cleaning, all in remodeling	
			76 	( A E )
			2 %	2#2) UU
<del></del>				-
			:0	_
·			( <u>()</u> []	32
			ਜ਼ਾਂ <i>ਹ</i> . ਜ਼ਾਜ	
TICLE IV SH.	ARES s of stock is: 100		STATE E. FL	
TICLE IV SH. number of shares	ARES s of stock is: 100		E. FL	
number of shares	ARES s of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS		STATE	
number of shares	s of stock is: 100  TIAL OFFICERS AND/OR DIRECTORS		ET TATE	y: 30
number of shares	S of stock is: 100  TIAL OFFICERS AND/OR DIRECTORS  Fitle: Josuc Daniel Moncada Sanchez- VP	Name and Title	Sergio Massiani Martinez - P	چ: ۵a 
number of shares  ICLE V INI  Name and 1	s of stock is: 100  TIAL OFFICERS AND/OR DIRECTORS	Name and Title Address:	Sergio Massiani Martinez - P	_
number of shares  ICLE V INI  Name and 1	S of stock is: 100  TIAL OFFICERS AND/OR DIRECTORS  Fitle: Josuc Daniel Moncada Sanchez- VP  2810 Nw 181st Street	Name and Title Address:	Sergio Massiani Martinez - P	9: 30 
Name and T	S of stock is: 100  TIAL OFFICERS AND/OR DIRECTORS  Fitle: Josuc Daniel Moncada Sanchez- VP  2810 Nw 181st Street	Name and Title Address: 	Sergio Massiani Martinez - P  1329 St Tropez Cit Apt 509  Weston, Florida 33326	9: 30 
Name and T	TIAL OFFICERS AND/OR DIRECTORS  Fitle: Josuc Daniel Moncada Sanchez- VP  2810 Nw 181st Street  Miami Gardens, Florida 33056	Name and Title Address:  Name and Title	Sergio Massiani Martinez - P  1329 St Tropez Cit Apt 509  Weston, Florida 33326	ج. ۵۵ 
Name and T  Name and T	TIAL OFFICERS AND/OR DIRECTORS  Fitle: Josue Daniel Moneada Sanchez- VP  2810 Nw 181st Street  Miami Gardens, Florida 33056	Name and Title Address:  Name and Title	Sergio Massiani Martinez - P  1329 St Tropez Cit Apt 509  Weston, Florida 33326	ج. ۵۵ 
Name and T  Name and T	TIAL OFFICERS AND/OR DIRECTORS  Fitle: Josue Daniel Moneada Sanchez- VP  2810 Nw 181st Street  Miami Gardens, Florida 33056	Name and Title Address:  Name and Title	Sergio Massiani Martinez - P  1329 St Tropez Cit Apt 509  Weston, Florida 33326	ج. ۵۵ 
Name and T Address  Name and T Address	TIAL OFFICERS AND/OR DIRECTORS  Fitle: Josue Daniel Moneada Sanchez- VP  2810 Nw 181st Street  Miami Gardens, Florida 33056	Name and Title Address:  Name and Title Address:	Sergio Massiani Martinez - P  1329 St Tropez Cit Apt 509  Westen, Florida 33326	9: 30 
Name and T Address  Name and T Address	TIAL OFFICERS AND/OR DIRECTORS  Fitle: Josue Daniel Moneada Sanchez- VP  2810 Nw 181st Street  Miami Gardens, Florida 33056	Name and Title Address:  Name and Title Address:	Sergio Massiani Martinez - P  1329 St Tropez Cit Apt 509  Westen, Florida 33326	9: 30 
Name and T Address  Name and T Address	TIAL OFFICERS AND/OR DIRECTORS  Fitle: Josue Daniel Moneada Sanchez- VP  2810 Nw 181st Street  Miami Gardens, Florida 33056	Name and Title Address:  Name and Title Address:  Name and Title Name and Title	Sergio Massiani Martinez - P  1329 St Tropez Cit Apt 509  Westen, Florida 33326	4: 3a

76381	Pag <del>a</del> ; 5 of 5	2021-10-01 16:19:45 GMT	17863641047	From: your da
			(H21000365313	
Name	and Title:	Name and	Title:	
Add	ress	Address:		
ABTICLET	. Dreierenen Jerer			
	I REGISTERED AGENT d Florida street address (P.O	). Box NOT acceptable) of the register	edagentis:	
Name:	Sergio Massiani Martin	cz		
Address:	-	st 509		
Addicss.				
	Weston, Florida 33326	<u> </u>		
ARTICLEV	II INCORPORATOR			2021 OCT -1 SECRETAR TALLAH
MATICIAL		ic		大学 一
	daddress of the incorporator i	13.		
		cada Sanchez		EF.
The name an	Josue Daniel Mono			SEORTIARY OF STATE
The <u>name an</u> Name:	Josue Daniel Mono	cada Sanchez		1 9: 39 F STATE EE. FL
The <u>name an</u> Name: Address:	Josue Daniel Mono 2810 Nov.181st Stra Miami Gardens, Flo	eet orida 33056		9:39 FSTATE EE. FL
The <u>name an</u> Name; Address:  ARTICLE VI Effective date	Josue Daniel Mons  2810 Nov. 181st Stru  Miami Gardens, Flo  III EFFECTIVE DATE: e, if other than the date of filir	eada Sanchez		39 ATE

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

Sergio Massiani Martinez	09/29/2021
Required Signature/Registered Cent	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.

Josus Daniel Monacada	Sancher	09/29/2021	
copred Signature/Incorporator		Date	