

01-07-22 13:49

From: Servicell

To: 8506176381

: 3056359868

# 1 / 3

P22000001560  
Division of Corporations  
Electronic Filing Cover Sheet

**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.**

(((H22000009433 3)))



H22000009433ABCX

**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:

Account Name : SERVICELL WIRELESS REPAIR CENTER, CORP.  
Account Number : I20160000091  
Phone : (786)786-3487  
Fax Number : (305)635-9868

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

Email Address: jj.servicer@yahoo.com

**FLORIDA PROFIT/NON PROFIT CORPORATION  
DIAS CRUZ GENERAL SERVICES CORP**

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

Electronic Filing Menu

Corporate Filing Menu

Help

D. O'KEEFE

JAN 10 2022

RECEIVED  
2022 JAN -7 PM 12:40

2022 JAN -7 AM 9:30

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

H220060694333

**ARTICLE I NAME**

The name of the corporation shall be:

Dias Cruz General Services Corp.**ARTICLE II PRINCIPAL OFFICE**

Principal street address

3420 NW 10th Ave Apt 3

Mailing address, if different is:

Miami FL 33127**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful business**ARTICLE IV SHARES**

The number of shares of stock is:

100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: P. Ross D Dias Aguilera Name and Title:Address 3420 NW 10th Ave Address:Apt 3Miami FL 33127Name and Title: VP Henry Adalid Cruz Name and Title:Address 3420 NW 10th Ave Apt 3 Address:Miami FL 33127

Name and Title: Name and Title:

Address Address:

H220000094333

Name and Title: _____	Name and Title: <u>H 2200000 94333</u>
Address _____	Address: _____
_____	_____
_____	_____

**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Rosa D. Dias Aguilera  
 Address: 3420 NW 10th Ave Apt 3  
Miami FL 33127

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

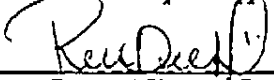
Name: Rosa D. Dias Aguilera  
 Address: 3420 NW 10th Ave Apt 3  
Miami FL 33127

**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*

 01/07/2022  
 Required Signature/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 a third degree felony as provided for in s.817.155, F.S.*

 01/07/2022  
 Required Signature/Incorporator Date

H 2200000 94333