

# P22000027893

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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H220001333083ABCW

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

From:  
Account Name : TRAMILEX LLC  
Account Number : I20150000086  
Phone : (786)469-9163  
Fax Number : (305)848-3716

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

Email Address: \_\_\_\_\_

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## FLORIDA PROFIT/NON PROFIT CORPORATION YUYO BARBERSHOP CORP

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

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CORPORATIONS  
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SERVICES

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**COVER LETTER**

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

**SUBJECT:** YUYO BARBERSHOP 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  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** YUDIEL ROQUE  
Name (Printed or typed)  
8401 SW 107TH AVE APT 237E  
Address  
MIAMI, FL 33173  
City, State & Zip  
(786)901-0207  
Daytime Telephone number  
E-mail address: (to be used for future annual report notification)

ALLAHISSIE, FL

2023 APR 12 AM 10:38

**NOTE:** Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

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

ARTICLE I. NAME YUYO BARBERSHOP CORP

The name of the corporation shall be:

ARTICLE II. PRINCIPAL OFFICE

Principal street address 8401 SW 107TH AVE APT 237E

MIAMI, FL 33173

Mailing address, if different is:

SAME

ARTICLE III. PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV. SHARES 100

The number of shares of stock is:

ARTICLE V. INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: YUDIEL ROQUE, P
Address: 8401 SW 107TH AVE APT 237E
MIAMI, FL 33173

Name and Title:
Address:
[Stamp: 2023 APR 12 AM 10:39]
[Stamp: MIAMI ASSOCIATES, FL]

Name and Title:
Address:
Name and Title:
Address:

Name and Title:
Address:
Name and Title:
Address:

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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: YUDIEL ROQUE  
 Address: 8401 SW 107TH AVE APT 237E  
MIAMI, FL 33173

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: YUDIEL ROQUE  
 Address: 8401 SW 107TH AVE APT 237E  
MIAMI, FL 33173

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 04/12/2022 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business 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

04/12/2022

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

04/12/2022

Date

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 TALLAHASSEE  
 STATE OF FLORIDA