

P23000009509

Florida Department of State
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.

((H23000047832 3))



H230000478323ABC\$

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 : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I2000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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
A.P SOCIAL SERVICES CORP

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

2023-5 Fil 4:47

2023-5 Fil 4:47

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

A.P Social Services CORP

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

305 W 68 St apt 319 Hialeah FL 33014

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Aida Maria Puchades Gonzalez
(p)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Aida Puchades
305 W 68 St apt 319 Hialeah FL 33014

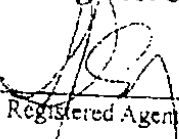
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Aida Maria Puchades
305 W 68th St apt 319 Hialeah FL 33014

23 FEB 2015

Required Signatures:

Having been named as registered agent to accept service of process for the above 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

02/06/2023
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.


Incorporator

02/06/2023
Date

2023-01-11 09:55