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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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

From: Account Name : TRAMILEX LLC  
Account Number : 120150000086  
Phone : (786)469-9163  
Fax Number : (305)848-3716

S. CHATNAM  
OCT - 5 2023

\*\*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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2023 OCT - 2 PM 4:20

FLORIDA PROFIT/NON PROFIT CORPORATION  
MORRO BLUE SERVICES CORP

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

2023 OCT - 2 PM 8:28

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### COVER LETTER

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

**SUBJECT:** MORRO BLUE SERVICES 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:** YUDEISYS FERNANDEZ  
Name (Printed or typed)  
14511 SW 10th ST  
Address  
MIAMI, FL 33184  
City, State & Zip  
(786)326-2615  
Daytime Telephone number  
yudinails.top@gmail.com  
E-mail address: (to be used for future annual report notification)

**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

The name of the corporation shall be: MORRO BLUE SERVICES CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address  
14511 SW 10th ST

MIAMI, FL 33184

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

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: YUDEISYS FERNANDEZ, P

Address: 14511 SW 10th ST.

MIAMI, FL 33184

Name and Title:

Address:

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: YUDEISYS FERNANDEZ  
 Address: 14511 SW 10th ST  
MIAMI, FL 33184

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: YUDEISYS FERNANDEZ  
 Address: 14511 SW 10th ST  
MIAMI, FL 33184

2023-10-02 PM 8:28

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 10/02/2023 (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 10/02/2023  
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.*

\_\_\_\_\_  
 Required Signature/Incorporator 10/02/2023  
Date

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