## Form Department CA 3

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to: Division of Corporations Fax Number (850)617-6381 From: : CG TAX, INC. Account Name : 119998000017 Account Number : (305)485-9300 Phone Fax Number : (305)485-1098 \*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\* Emmil Address: FLORIDA PROFIT/NON PROFIT CORPORATION RAUL MERCEDES SERVICES, INC. 0 Certificate of Status 1 Certified Copy 04 Page Count \$78.75 Estimated Charge

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#### ARTICLES OF INCORPORATION

OF

#### RAUL MERCEDES SERVICES, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporate, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

#### ARTICLE I

The name of this corporation shall be:

RAUL MERCEDES SERVICES, INC.

# SECRETARY OF STATE

#### ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

#### **ARTICLE III**

The general nature of the business and objects and purposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

(1) Said corporation shall further have powers: To have perpetual succession by it's corporate

#### RAUL MERCEDES SERVICES, INC.

#### ARTICLE IV

The aggregate number of shares, which the corporation shall have authority to issue, is the total sum of 50 shares, having an individual par value of \$10.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation

#### ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

#### MELBA, ACOSTA ESTUPINAN 6125 W 20<sup>TH</sup> AVE HIALEAH, FL 33012

The principal office shall be:

6125 W 20<sup>TH</sup> AVE HIALEAH, FL 33012

ARTICLE VI

The initial Board of Directors shall consist of a total of ONE (01) person, and the name and address of the person who is to serve as initial director:

MELBA, ACOSTA ESTUPINAN 6125 W 20<sup>TH</sup> AVE HIALEAH, FL 33012 **PRESIDENT** 

The name and address of the incorporator executing these Articles of Incorporation is

MELBA, ACOSTA ESTUPINAN 6125 W 20<sup>TH</sup> AVE HIALEAH, FL 33012

IN WITNESS WHERE OF, the undersigned incorporator has (ve) executed these Articles of Incorporation this NOVEMBER 13, 2023

MELBA, ACOSTA ESTUPINAN

### CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, Submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The Name of the corporation is:

RAUL MERCEDES SERVICES, INC.

2. The Name and Address of the registered agent and office is:

2023 NOV 13 AM 8: 21 SECKL CARY OF STATE TALLAHASSEE, FL

MELBA, ACOSTA ESTUPINAN 6125 W 20<sup>TH</sup> AVE HIALEAH, FL 33012

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES. AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Date: NOVEMBER 13, 2023