

Florida Department of State

P25000001138

Division of Corporations
Electronic Filing Cover Sheet

1.8-25

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To:

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

From:

Account Name : DMG FINANCIAL SERVICES INC
Account Number : T20230000151
Phone : (305)595-2407
Fax Number : (305)595-2408

****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

ymca enterprises corp

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

RECEIVED

2025 JAN -7 AM 10:53

STATE OF FLORIDA
TALLAHASSEE, FL

W25000002673

25 JAN -7 AM 9:32

FILED
SECRETARY OF STATE
OFFICE OF ACTIONS

January 6, 2025

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

Re: YMCA ENTERPRISES CORP

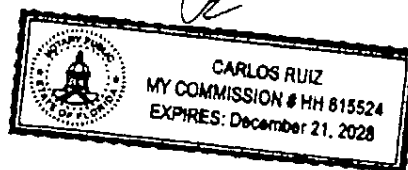
To whom it may concern:

By means of this letter I am advising that I have no intentions of re-instating the above mentioned dissolved corporation.

Should you have any questions or concerns please do not hesitate to contact me.

Sincerely,


GHEILA SANCHEZ



25 JAN -7-AM 9:32

FILED
CLERK OF STATE
DIVISIONS

COVER LETTER

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

SUBJECT: YMCA ENTERPRISES 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: MARIA E RUIZ

Name (Printed or typed)

7750 SW 117TH AVE SUITE 203

Address

MIAMI FLORIDA 33183

City, State & Zip

305 595-2407

Daytime Telephone number

MARIAQUIROS9@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: YMCA ENTERPRISES CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

13451 SW 67TH STREETMIAMI, FLORIDA 33183**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LEGAL PURPOSES**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: CHEILA SANCHEZ, PRES

Name and Title: _____

Address

13451 SW 67TH STREET

Address: _____

MIAMI, FLORIDA 33183

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

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SECRETARY OF STATE
CORPORATIONS

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

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

Name: CHEILA SANCHEZ

Address: 13451 SW 67TH STREET

MIAMI, FLORIDA 33183

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: CHEILA SANCHEZ

Address: 13451 SW 67TH STREET

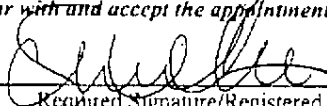
MIAMI, FLORIDA 33183

ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: 01/07/2025. (OPTIONAL)

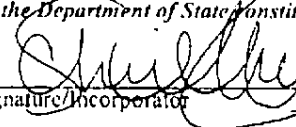
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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.

	<u>01/06/2025</u>
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.

	<u>01/06/2025</u>
Required Signature/Incorporator	Date

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JAN 08 2025
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