# P91000075735

Requestor's Name 890 S.W. 87 AVENUE, SUITE: 16 Address MIAMI, FLORIDA 33174 (305)552-5973 City/State/Zip Office Use Only LOCAL REPRESENTATIVE TALLAHASSEE CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. ABC BENEFIT SERVICES, INC.
(Corporation Name) (Document #V) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Certified Copy Mail out ☐ Will wait Certificate of Status Photocopy NEW FILINGS AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent **Domestication** Dissolution/Withdrawal Other Merger OWNERWINGS **MOUALIFICATION Annual Report** 13.5 CC 25.5 15.75.6 1 Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials

ARTICLES OF INCORPORATION

42

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SECRETARY OF STATE
TALL AHASSEE FLORIDA

**OF** 

A B C BENEFIT SERVICES, INC.

The undersigned acting as subscribers of a corporation under the Florida Corporation Law, adopt the following Articles of Incorporation for such Corporation.

### Article [

The name of the Corporation is A B C BENEFIT SERVICES, INC. The address shall be at P.O. Box 1894 Hialeah, Fl 33011.

# Article II

The purpose for which the corporation is organized is to engage in any activity or business permitted under the Laws of the United States and the State of Florida.

### Article III

The maximum number of shares which the corporation is authorized to issue and have outstanding at any one time is 30 shares of Common Stock, and which common stock shall be of no par value; all stock is to be issued as fully paid and exempt from assessment.

### Article IV

The capital with which the corporation shall begin business is not less than \$ 500.00 (Five hundred dollars).

# Article V

The period of duration of the corporation is perpetual.

# Article VI

The initial post office address and principal office of the corporation in the State of Florida, shall be at P.O. Box 1894 Florida 33186. The Board of Directors may from time to time move the principal office to another address within the State of Florida.

# Article VII

The registered agent and the registered address of this corporation is: Marielena Zarut, 17961 S.W.33 St., Miramar, Florida 33029.

# Article VIII

The number of directors constituting the initial Board of Directors, consists of not less than Three (3) nor more than Five (5).

# Article IX

The names and post office addresses of the members of the first Board of Directors and slate of Corporate officers are as follows:

NAME	ADDRESS	OFFICER
Ricardo Alvarez	1555 W. 44 Pl. #220, Hialeah, FL 33012	President
Marielena Zarut	17961 S.W. 33 St., Miramar, FL 33029	Treasurer
Amarilys Gonzalez	5830 W. 18 Ln. #102, Hialeah, FL 33012	Secretary

# Article X

The name and post office address of the person subscribed to this Articles of Incorporation is: Marielena Zarut, 17961 S.W. 33 St., Miramar, FL 33029.

# Article XI

No stockholders of the corporation shall be permitted to sell or offer for sale his/her shares of the stock in the corporation without first offering said shares for sales to all other stockholders of the corporation, at their book value.

In witness whereof, we the undersigned, have made, subscribed and acknowledged this Articles of Incorporation, this 27th day of August, 1997.

Ricardo Alvarez

Subscribed

Marielena Zarut

Subscribed

Amarilys Gonzalez

Subscrib@d

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OR DOMICILE FOR THE SERVICE OF PROCESS 7 SEP -2 PH 1: 25 WITHIN THE STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

TALLAHASSEF FLORIDA

IN PURSUANCE OF CHAPTER 48.091. Florida Statutes, the following is submitted in compliance with said Act:

FIRST -- That A B C BENEFIT SERVICES, INC. desiring to organize under the Laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation, at the City of Hialeah, State of Florida, named Marielena Zarut as its agent to accept service of process within this State.

# **ACKNOWLEDGMENT**

Having been named to accept service of process for the above said corporation at the place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provisions of said Act relative to keeping open said office.

Marielena Zaru

STATE OF FLORIDA)

SS.

COUNTY OF DADE)

BEFORE ME, the undersigned authority, personally appeared, Marielena Zarut, to me well known to be the person described herein, and she acknowledged before me, according to the Law, that she made and subscribed the same for the purpose therein mentioned and set forth.

IN WITNESS THEREOF, I have hereunto set my hand and seal, this 27th day of August, 1997.

TAKY PUBLIC, STATE OF FLORIDA AT LARGE

My commission expires:

