

P99000058723

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

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.

(((H99000015824 8)))

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) 922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

SECRETARY OF STATE
TALLAHASSEE FLORIDA

99 JUN 29 PM 2:08

FILED

FLORIDA PROFIT CORPORATION OR P.A.

VELIZ MAINTENANCE

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

B. McKnight JUN 29 1999

99 JUN 29 PM 2:08
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

ARTICLES OF INCORPORATION
OF
VELIZ MAINTENANCE CORP.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, 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:

VELIZ MAINTENANCE CORP.

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 purpose proposed 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) Transact any and all lawful business.
- (2) Said corporation shall further have powers:
To have perpetual succession by its corporate
name; VELIZ MAINTENANCE CORP.

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:

YORICK VELIZ
275 NW 72 AVENUE APT 12
MIAMI, FL. 33126

The principal office shall be:

8230 NW 10TH STREET UNIT C-3
MIAMI, FL. 33126

ARTICLE VI

The initial Board of Directors shall consist of a total of THREE (03) persons, and the name and address of the person who is to serve as an initial director is:

YV
YORICK VELIZ
275 NW 72 AVENUE APT 12
MIAMI, FL. 33126

PRESIDENT 25%

T. Veliz JV
JUAN VELIZ
8230 NW 10 ST. UNIT C-3
MIAMI, FL 33126

V-PRESIDENT 50%
TREASURER

CV
CARLOS VELIZ
8230 NW 10 ST. UNIT C-3
MIAMI, FL 33126

SECRETARY 25%

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

YORICK VELIZ
275 NW 72 AVENUE APT 12
MIAMI, FL. 33126

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 28th. day of June, 1999.

YV

YORICK VELIZ

**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:

VELIZ MANINTENANCE CORP.

2. The name and address of the registered agent and office is

YORICK VELIZ
275 NW 72 AVENUE NO. 12
MIAMI, FLORIDA 33126

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



99 JUN 29 PM 2:08
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED