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# **COVER LETTER**

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

SUBJECT:	Parcifa Secondora	VICES Inc TENAME-MUST INCL	UDE SUFFIX)	-	
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l a check for: 25		
⋈ \$70.00 Filing Fee	☐ S78.75 Filing Fee & Certificate of Status	& Certified Copy	& Certificate of Status 구돌	2	
		ADDITIONAL CO	PY REQUIRED		
FROM:	I srael Diaz Name 750 SW 10th				
_	Pompano be	State & Zip	3060		
754 271 1698  Daytime Telephone number					
Srldiaz martinez @ gmail.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)

RTICLE II - PRINC		ervices Inc	
750 SW 10	Principal street address th St Apt 2 ach, FL 33060	Mailing	address, if different is:
RTICLE III PURPO he purpose for which t	DSE he corporation is organized is: An	y and all lea	al business
			2025 JAN
			TO MA 9:
Name and Title	LOFFICERS AND/OR DIRECTORS	P Name and Title:	
Address	750 SW 10th St Ar Pompano beach, FL 33060		
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:_ Address			

Name and	Title:	Name and Title:	
Address		Address:	
•			
ADTICLE M. D	EGISTERED AGENT		
The name and Flo	rida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	I start Diaz Martinez	<del>_</del>	
Address:	750 SW 10th St Apt	<u> </u>	
	750 SW 10th St Apt pompano beach, FL 3306	<u>0</u>	
ARTICL <u>E VII</u>	NCORPORATOR		
The <u>name and</u> ad	dress of the Incorporator is:		2025
Name:	Israel Diaz Martinez	<u>-</u>	1025 JAN 16
Address:	750 SW 10th St Apt.	2	5 5
	750 SW 10th St Apt. Pompano beach, FL 3	<u>30</u> 60	NIE WORLD
	,		9: O
ARTICLE VIII	EFFECTIVE DATE:	(()PTI()N'A! )	<b>[]</b>
(If an effective d	other than the date of filing:ate is listed, the date must be specific and car	not be more than five days pr	ior or 90 days after the
filing.)			and the state of the state of the
Note: If the date	inserted in this block does not meet the applical ffective date on the Department of State's record	ble statutory filing requirements ds.	i, this date will not be listed as
Having been nan	sed as registered agent to accept service of proces amiliar with and accept the appointment as regi:	ss for the above stated corporationstered agent and agree to act in a	on at the place designated in the this capacity
(eragicale, ram)			1/15/2025
	Required Signature/Registered Agent		Date
I submit this doc	rement and affirm that the facts stated herein	are true. I am aware that the fi	alse information submitted in
document to the	Department of State constitutes a third degree fe	tony as proviueu jor tu 5.017.12.	, , , , , , , , , , , , , , , , , , ,
¥′	( ) dear )		1/15/2025
Required Signati	me/meorporator		