## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : S.LLANIO BUSINESS SERVICES INC

Account Number : I20200000011 Phone : (239)542-9184 Fax Number : (239)540-1760

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address: s.llaniobusiness@gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION AGSL Services Inc

Certificate of Status Certified Copy 1 Page Count 03 \$87.50 Estimated Charge

Electronic Filing Menu

Corporate Filing Menu

Help

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

CLET NAME	AGSI Services Inc	
ame of the corporat	ion shall be: AGSL Services Inc	
	IPAL OFFICE Principal <u>street</u> address	Mailing address, if different is:
Linhart Ave Lot 47	Tritopar <u>servia</u> mander	
Nyers, Ft. 33901		
<u> FICLETH PURPO</u>	<u>DSE</u> ne corporation is organized is: <u>ANY ANI</u>	D ALL LAWFUL BUSINESS
purpose for which u	ne corporation is organized is:	
<del></del>		
······································		
number of shares of a	L OFFICERS AND/OR DIRECTORS	
		Manager and 1950a.
Name and Title		Name and Title:
Address	1825 Linhart Ave Lot 47	Address:
	Fort Myers, FL 33901	
	, on myo.s, . z eco .	
Name and Title:		Name and Title:
Address		Address:
Name and Title		Name and Title:
rigino aiju i ilie.		
Address		Address:
		-

Name and	i Title:Name a	and Title:	
Address	Addres		
	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of the regis	stered agent is:	
Name:	Ivis Andress Sanchez Cruz		
Address:	1825 Linhart Ave Lot 47		
	Fort Myers, FL 33901		
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		
The name and ad	Idvess of the Incorporator is:		
Name:	Ivis Andress Sanchez Cruz		
Address:	1825 Linhart Ave Lot 47		
	Fort Myers, FL 33901		
Effective date, if (If an effective d filing.)  Note: If the date	EFFECTIVE DATE: other than the date of filing: late is listed, the date must be specific and cannot be more inserted in this block does not meet the applicable statutory	re than five days prior or 90 days after the	
the document's e	ffective date on the Department of State's records.		
Having been nan certificate, I am f	ned as registered agent to accept service of process for the ab amiliar with and accept the appointment as registered agent	ove stated corporation at the place designated in this and agree to act in this capacity	
Ivis Andress Sanchez Cruz		02/05/2025	
	Required Signature/Registered Agent	Date	
I submit this doc document to the i	rument and affirm that the facts stated herein are true. I a Department of State constitutes a third degree felony as prov	on aware that the false information submitted in a pided for in s.817.155, F.S.	
Ivis Andress S		02/05/2025	
Required Signatu	re/Incorporator	Date ~ 2	
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		· - (i)	
		AM 6:	