

P19000071116

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

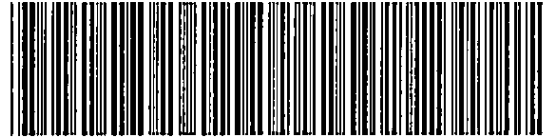
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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09/18/19--01001--020 **437.50

19 SEP 17 PM 3:31

MASSREGISTRY

2019 SEP 17 PM 4:49

FILED

COVER LETTER

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

SUBJECT: JP'S Solutions & Services Inc

(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 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

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

FROM: JP' S Solutions & Services Inc

Name (Printed or typed)

37 N ORANGE AVE

Address

ORLANDO FL 32801

City, State & Zip

888 534-1267

Daytime Telephone number

JJAY27493@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)

ARTICLE I NAME JP' S Solutions & Services Inc
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address _____ Mailing address, if different is: _____

37 N ORANGE AVE _____

ORLANDO FL 32801 _____

ARTICLE III PURPOSE ANY AND ALL LAWFUL BUSIENSS
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES 1000
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JULIUS CHESSE P _____ Name and Title: _____
Address 37 N ORANGE AVE _____ Address: _____
ORLANDO FL 32801 _____

Name and Title: JULIUS CHESSE S _____ Name and Title: _____
Address 37 N ORANGE AVE _____ Address: _____
ORLANDO FL 32801 _____

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

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2019 SEP 17 PM 4:49
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF ORANGE, FLORIDA

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

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: ROMAN SNOW
Address: 56 E PINE ST
ORLANDO FL 32801

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: JULIUS CHESSE
Address: 37 N ORANGE AVE
ORLANDO FL 32801

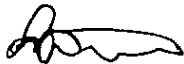
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

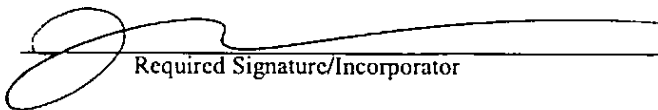


Required Signature/Registered Agent

09/15/19

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.



Required Signature/Incorporator

09/15/19

Date