

**2017 FLORIDA PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P12000080516

**FILED**  
**Feb 26, 2017**  
**Secretary of State**  
**CR6181046933**

**Entity Name:** INFINITE PARTNER SOLUTIONS TAXES AND MULTI-SERVICES INC.

**Current Principal Place of Business:**

1299 NW 40TH AVE  
G  
LAUDERHILL, FL 33313

**Current Mailing Address:**

1299 NW 40TH AVE  
G  
LAUDERHILL, FL 33313 US

**FEI Number: 46-1042263**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

GARY, LAKESHA  
340 IOWA AVE  
FT LAUDERDALE, FL 33312 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE: LAKESHA GARY**

**02/26/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name GARY, LAKESHA S  
Address 340 IOWA AVE  
City-State-Zip: FT LAUDERDALE FL 33312

Title VP  
Name MALDONADO, NYASIA T  
Address 340 IOWA AVE  
City-State-Zip: FT LAUDERDALE FL 33312

Title SEC  
Name MALDONADO, VALERIE A  
Address 340 IOWA AVE  
City-State-Zip: FT LAUDERDALE FL 33312

Title AUTHORIZED REPRESENTATIVE  
Name MOORE, OCTAVIUS X  
Address 340 IOWA AVE  
City-State-Zip: FT LAUDERDALE FL 33312

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: LAKESHA GARY**

**PRESIDENT**

**02/26/2017**

Electronic Signature of Signing Officer/Director Detail

Date