

P12000019729

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED FEB 28 2012

COVER LETTER

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

SUBJECT: MULTISERVICE SOLUTIONS, 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: JOSE ALBERTO DURAN

Name (Printed or typed)

421 WEST VINE STREET

Address

KISSIMMEE, FLORIDA 34741

City, State & Zip

678-469-0419

Daytime Telephone number

JOSDUR@MSN.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

The name of the corporation shall be: **MULTISERVICE SOLUTIONS, INC**

ARTICLE II PRINCIPAL OFFICE

Principal street address
421 WEST VINE STREET
KISSIMMEE, FLORIDA 34741

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Accounting, Tax return filing, Auto and Home Insurance, Real Estate Investments, Translations

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Jose Alberto Duran / President**
Address: **421 West Vine Street**
Kissimmee, Florida 34741

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

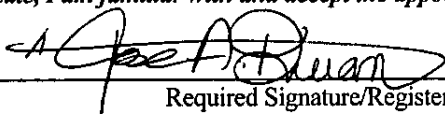
Name: **Jose Alberto Duran**
Address: **421 West Vine Street**
Kissimmee, Florida 34741

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Jose Alberto Duran**
Address: **421 West Vine Street**
Kissimmee, Florida 34741

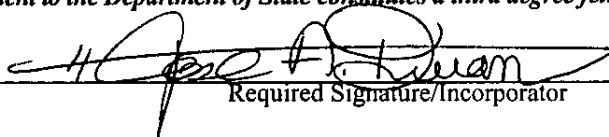
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

02-21-2012

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

02-21-2012

Date

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