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| (Re                                   | questor's Name)   |           |
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| (Cit                                  | y/State/Zip/Phone | e #)      |
| PICK-UP                               | ☐ WAIT            | MAIL      |
| (Bu                                   | siness Entity Nar | ne)       |
| (Do                                   | cument Number)    |           |
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| Certified Copies                      | Certificates      | of Status |
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| Special Instructions to I             |                   |           |
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J. Shivers MAR 23 2012





February 14, 2012

PHITO NOEL 5115 KIPP PLACE ORLANDO, FL 32808

SUBJECT: NAPHTALI MULTI SERVICES, INC.

Ref. Number: W12000008852

We have received your document for NAPHTALI MULTI SERVICES, INC. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the designation "L.L.C.," "LLC," "L.C.," or "LC," or the words "LIMITED LIABILITY COMPANY," or "LIMITED COMPANY." Please amend the name of your entity accordingly.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 312A00006849

## **COVER LETTER**

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

| Enclosed are an original and one (1) copy of the |   | <u> </u> |
|--|---|----------|
| \$70.00 Filing Fee Filing Fee                    | \$78.75 \$87.50 Filing Fee,                             |          |
| & Certificate of Status                          | & Certified Copy Certified Copy & Certificate of Status |          |
|  | ADDITIONAL COPY REQUIRED                                |          |
|  |   | _        |
| FROM: <b>Naphtali Multi Service</b>              | Corp.   |          |
| , N  | ame (Printed or typed)                                  | 201      |
| - <u>5115 Kipp Place,</u>                        | Address   | E 12.    |
|  | Address   | 7 22     |
| Orlando FL 32808                                 | City, State & Zip                                       | 至 m      |
| 321-388-5529                                     | ORDA  |          |
| Daytin   | ne Telephone number                                     |          |
|  | 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   | PRINCIPAL OFFICE  |   |   |
|---|---|---|---|
|   | Principal street address  | Mailing ac  | ldress, if different is:  |
|   | 5115 Kipp place   |   |   |
|   | Orlando FL 32808  |   |   |
| he purpose for  | PURPOSE which the corporation is organized is: to do houses repair work.  |   |   |
| RTICLE V  | SHARES hares of stock is500  INITIAL OFFICERS AND/OR DIRECT Title: Phito Noel, MGR 5115 Kipp place Orlando, FL 32808  | Name and Title: Address:  |   |
| Name and  | Title:  |   |   |
| Address:  |   | Address:  |   |
| Name and Address:   | Title:  | Address:  |   |
|   |   |   |   |
| RTICLE VI   | REGISTERED AGENT  |   | 7A 2  |
|   | Florida street address (P.O. Box NOT acceptab   |   | 2012<br>SEC   |
| ne <u>name and I</u><br>Name:   | Florida street address (P.O. Box NOT acceptate Phito Noel   |   | 2012 HA<br>SECKE<br>TALLAH  |
| e <u>name and I</u>   | Phito Noel 5115 Kipp place  |   | 2012 MAR 2<br>SECRETAI<br>TALLAHAS  |
| e <u>name and I</u><br>Name:  | Florida street address (P.O. Box NOT acceptate Phito Noel   |   | 2012 HAR 22<br>SECKETARY<br>TALLAHASSE  |
| e <u>name and I</u><br>Name:<br>Address:  | Phito Noel 5115 Kipp place  |   | R 22<br>ASSEE   |
| e <u>name and f</u><br>Name:<br>Address:<br>RTICLE VII<br>e <u>name and a</u>                                 | Phito Noel  5115 Kipp place Orlando, FL 32808  INCORPORATOR ddress of the Incorporator is:  |   | R 22<br>ASSEE   |
| ne name and h<br>Name:<br>Address:<br>RTICLE VII<br>name and a<br>Name:                                       | Phito Noel  51.15 Kipp place Orlando , FL 32808  INCORPORATOR  ddress of the Incorporator is: Phito Noel  |   | R 2   |
| e <u>name and f</u><br>Name:<br>Address:<br>RTICLE VII<br>e <u>name and a</u>                                 | Phito Noel  51.15 Kipp place Orlando , FL 32808  INCORPORATOR  ddress of the Incorporator is: Phito Noel  |   | R 22<br>ASSEE   |
| e <u>name and I</u> Name: Address:  RTICLE VII e <u>name and a</u> Name:                                      | Phito Noel  5115 Kipp place Orlando, FL 32808  INCORPORATOR ddress of the Incorporator is:  |   | R 22<br>NSSEE   |
| e name and I<br>Name:<br>Address:<br>RTICLE VII<br>e name and a<br>Name:<br>Address:                          | Phito Noel  51.15 Kipp place Orlando , FL 32808  INCORPORATOR  ddress of the Incorporator is: Phito Noel  |   | R 22 AM IL III  |
| e name and I<br>Name:<br>Address:<br>RTICLE VII<br>e name and a<br>Name:<br>Address:                          | Phito Noel  51.15 Kipp place Orlando , FL 32808  INCORPORATOR  ddress of the Incorporator is: Phito Noel 51.15 Kipp place Orlando , FL 32808  | rocess for the above stated corpo                                       | R 22 AM III. II. ASSEE, FLORIDA   |
| ne name and he Name: Address:  RTICLE VII name and a Name: Address:   | Phito Noel  5115 Kipp place Orlando, FL 32808  INCORPORATOR ddress of the Incorporator is: Phito Noel 5115 Kipp place Orlando, FL 32808   | rocess for the above stated corpo<br>as registered agent and agree to a | ASSEE, FLORIDA  oration at the place designated ct in this capacity                               |
| e name and I<br>Name:<br>Address:<br>RTICLE VII<br>e name and a<br>Name:<br>Address:                          | Phito Noel  5115 Kipp place Orlando, FL 32808  INCORPORATOR ddress of the Incorporator is: Phito Noel 5115 Kipp place Orlando, FL 32808   | rocess for the above stated corpo<br>as registered agent and agree to a | ASSEE, FLORIDA  oration at the place designated ct in this capacity                               |
| e name and I<br>Name:<br>Address:<br>RTICLE VII<br>e name and a<br>Name:<br>Address:                          | Phito Noel  5115 Kipp place Orlando, FL 32808  INCORPORATOR ddress of the Incorporator is: Phito Noel 5115 Kipp place Orlando, FL 32808   | rocess for the above stated corpo<br>as registered agent and agree to a | R 22 AM III. II. ASSEE, FLORIDA  oration at the place designated                                  |
| ne name and he Name: Address:  RTICLE VII name and a Name: Address:  aving been na is certificate, h          | Phito Noel  5115 Kipp place Orlando, FL 32808  INCORPORATOR  ddress of the Incorporator is: Phito Noel 5115 Kipp place Orlando, FL 32808  med as registered agent to accept service of plant am familiar with and accept the appointment of the Required Signature/Registered Agent   | rocess for the above stated corpo<br>as registered agent and agree to a | oration at the place designated ct in this capacity  2/ 15/ 12  Date                              |
| ne name and he Name: Address:  RTICLE VIII ne name and a Name: Address:  Aving been na is certificate, leases | Phito Noel  5115 Kipp place Orlando, FL 32808  INCORPORATOR  Incorporator is: Phito Noel 5115 Kipp place Orlando, FL 32808  Incorporator is: Phito Noel 5115 Kipp place Orlando, FL 32808  Imed as registered agent to accept service of plant familiar with and accept the appointment of the component and affirm that the facts stated hereing the stated hereing the component and affirm that the facts stated hereing the stated hereing | rocess for the above stated corpo<br>as registered agent and agree to a | oration at the place designated of the capacity  3/ 15/ 12  Coate  false information submitted in |
| e name and h Name: Address:  RTICLE VII e name and a Name: Address:  aving been na is certificate, l          | Phito Noel  5115 Kipp place Orlando, FL 32808  INCORPORATOR  ddress of the Incorporator is: Phito Noel 5115 Kipp place Orlando, FL 32808  med as registered agent to accept service of plant am familiar with and accept the appointment of the Required Signature/Registered Agent   | rocess for the above stated corpo<br>as registered agent and agree to a | oration at the place designated of the capacity  3/ 15/ 12  Coate  false information submitted in |