P12000096224

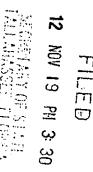
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	łdress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	isiness Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





500241893475

11/19/12--01022---001 **87.00



COVER LETTER

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

SUBJECT: YILL MULTISERVICES INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
T(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)			
Enclosed are an original and one (1) copy of the arti	icles of incorporation and a check for:			
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status			
	ADDITIONAL COPY REQUIRED			
FROM: MARIA A AL	Monte e (Printed or typed)			
806 dord	Address Avenue			
Orlando City,	PC 32809 State & Zip			
407.287 Daytime T	3 8756 elephone number			
E-mail address: (to be used	d tor 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)

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Name: Address: Address: Address: Required Signature/Registered Agent Agent	
ARTICLE IV SHARES The purpose for which the corporation is organized is: ARTICLE IV SHARES The number of shares of stock is: ARTICLE IV INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address:	
ARTICLE IV SHARES The number of shares of stock is: ACCOUNTING SETUILES ARTICLE V SHARES The number of shares of stock is: Address: Name and Title: Address: OTHER ADDRESS Name and Title: Address: Name and Title: Address: Name and Title: Address: Name and Title: Address:	
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address: Address: Name and Title: Address: Name and Title: Address: Name and Title: Address: A	451.0
The purpose for which the corporation is organized is: ACCOUNTING SETUILES ARTICLE IV SHARES The number of shares of stock is: Name and Title: Address:	09
The purpose for which the corporation is organized is: ACCOUNTING SETUILES ARTICLE IV SHARES The number of shares of stock is: OD ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address: OCLANDE AND Address: OCLANDE ASSESSED AND ADDRESS	
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title:	
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title:	
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title:	
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title:	
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title:	
Name and Title: Address: Addre	,
Name and Title: Many Address: Name and Title: Name and Title: Address: Name and Title: Name and Title: Address: Name and Title: Name and Title: Address:	
Name and Title: Address: Name: Address: Address: Name: Address:	
Name and Title: Address: ARTICLE VII REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: ARTICLE VII INCORPORATOR The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: ARTICLE VII INCORPORATOR The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: ARTICLE VII INCORPORATOR The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: ARTICLE VII INCORPORATOR The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: ARTICLE VII INCORPORATOR The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: ARTICLE VII INCORPORATOR The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: ARTICLE VII INCORPORATOR The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: ARTICLE VII INCORPORATOR The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: ARTICLE VII INCORPORATOR The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: AR	
Name and Title: Address: Address: Address: Address: Address: Address: Address: Address: Name: Address: Al Horle Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Name: Address: Address: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Address: Address: Address: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Address: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Address: ARTICLE VII INCORPORATOR The name and address of the address of the above stated corporation at the place design this certificate, I am familiar vita all decept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent / Incorporator Date	
Name and Title: Address: Name and Title: Address: Addr	
Name and Title: Address: Name and Title: Address: Name and Title: Address: Address:	•
Name and Title: Address: Address: Address: Address: Address: Address: Address: Name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: OLD JORDO FLORE ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Address: Address: Address: Address: Address: Address of the Incorporator is: Name: Address: Address: Address: Address: Address: Address of the Incorporator is: Name: Address: Address:	
Name and Title: Address: Name: Address: Add	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: OLD DOCAN AVENUE Address: Address: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Name: Address: Address: Address: Required Signature/Registered Agent Address: Required Signature/Registered Agent Address: Addre	<u> </u>
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: OLD DOCACN AVENUE Address: Address of the Incorporator is: Name: Address: Name: Address: Address: Name: Address: Address: Required Signature/Registered Agent Address for the above stated corporation at the place design this certificate, I am familiar with a bud accept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent Transporter Date	<u>.</u>
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Name: Address: Address: Address: Address: Required Signature/Registered Agent Age	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Address: Address: Address: Address: Required Signature/Registered Agent Tracoperator Required Signature/Registered Agent Tracoperator Date	<i>;</i>
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: Dob dorden Averue ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Dob dorden Averue Address: Name: Address: Bob dorden Averue Dorden Averue Address: Bob dorden Av	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: Dob dorden Averue ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Dob dorden Averue Address: Name: Address: Bob dorden Averue Dorden Averue Address: Bob dorden Av	
Name: Address: Onlandoff Almorre Address: Onlandoff Almorre Article VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Name: Address: Onlandoff Almorre Address: Name: Address: Onlandoff Almorre Address of the Incorporator is: Name: Address: Onlandoff Almorre Almorre Description Name: Address: Onlandoff Almorre Almorre Onlandoff Name: Address: Onlandoff Address: Address:	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Name: Address: Name: Address: Name: Address: Required Signature/Registered Agent Tracoporator Date PARA D PHOTE Address: Required Signature/Registered Agent Tracoporator Date	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Address: Having been named as registered aftent to accept service of process for the above stated corporation at the place design this certificate, I am familiar with a descript the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent Incorporator Date	
The name and address of the Incorporator is: Name: Address: **Required Signagare/Registered Agent** Incorporator** Name: **Required Signagare/Registered Agent** Incorporator** **Properties** **Required Signagare/Registered Agent** Incorporator** **Description of the Incorporator** **Properties** **Required Signagare/Registered Agent** **Incorporator** **Description of the Incorporator** **Properties** **Required Signagare/Registered Agent** **Incorporator** **Description of the Incorporator** **Description of the Incorporator** **Properties** **Properties** **Description of the Incorporator** **Description of the Incorporator** **Properties** **Description of the Incorporator** **D	
Name: Address: 806 Order Averve Orlando Fr. 30809 Having been named as registered agent to accept service of process for the above stated corporation at the place design this certificate, I am familiar with also accept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent Incorporator Date	
Address: 806 dorder Averve Offendo Fr. 3089 Having been named as registered affent to accept service of process for the above stated corporation at the place design this certificate, I am familiar with affel accept the appointment as registered agent and agree to act in this capacity Required/Signature/Registered Agent / Incorporator Date	
Having been named as registered agent to accept service of process for the above stated corporation at the place design this certificate, I am familiar with a per accept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent Incorporate Date	
Having been named as registered aftent to accept service of process for the above stated corporation at the place design this certificate, I am familiar with after accept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent Incorporate Date	
this certificate, I am familiar with all decept the appointment as registered agent and agree to act in this capacity 10-27-201 Required Signature/Registered Agent / Incorporater Date	
Required Signature/Registered Agent / Incorporator Date	ıated in
Required/Signature/Registered Agent / Incorporator Date	
Required/Signature/Registered Agent / Incorporator Date	<u>ا</u> ک
· · · · · · · · · · · · · · · · · · ·	
I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitt	ted in a
document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	

Date

Required Signature/Incorporator