

P13000051342

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

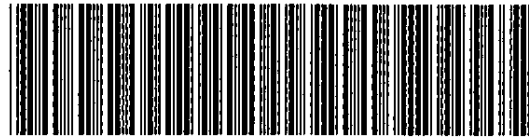
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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13 JUN 12 PM 4:25  
SECRET  
TALLAHASSEE, FL

T. Burch JUN 13 2013

*P. J. Smith*

## COVER LETTER

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

SUBJECT: PHV 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☒ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

FROM: PHYLLIS JACKSON  
Name (Printed or typed)

8905 SW 17A TERR  
Address

MIAMI, FL 33157  
City, State & Zip

\_\_\_\_\_  
Daytime Telephone number

PHVJACKSON@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**

The name of the corporation shall be:

PHV SOLUTIONS INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

8905 SW 177 TERR

MIAMI FL 33157

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

REAL ESTATE

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CLERK OF DISTRICT COURT  
MIAMI

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:

PHYLLIS H.V. JACKSON

Name and Title:

Address

8905 SW 177 TERR.

Address:

MIAMI, FL 33157

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

(conti.)

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: PHYLLIS JACKSON  
Address: 8905 SW 177 TER  
MIAMI FL 33157

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: PHYLLIS JACKSON  
Address: 8905 SW 177 TER  
MIAMI FL 33157

*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*

Phyllis M. Jackson  
Required Signature/Registered Agent

6-10-2013  
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.*

Phyllis M. Jackson  
Required Signature/Incorporator

6-10-2013  
Date

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CLERK OF COURT  
TALLAHASSEE, FL