

P14000019390

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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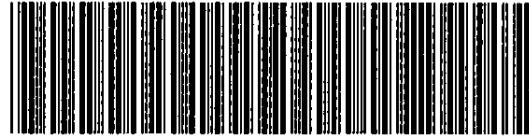
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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J 3/3/14

COVER LETTER

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

SUBJECT: NATASHA & COMPANY MULTI SERVICES, 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: **NATASHA BEAUBRUN**
Name (Printed or typed)
12460 SW 283 STREET
Address
HOMESTEAD, FLORIDA 33039
City, State & Zip
786-339-0076
Daytime Telephone number
almsoflove@yahoo.com
E-mail address: (to be used for future annual report notification)

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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)

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ARTICLE I NAME

The name of the corporation shall be: Natasha & Company Multi Services, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

12460 SW 283th Street #A
Homestead, Florida 33039

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide the community with the
best services in Immigration, Tax Preparer, Auto Insurance,
Corporation Preparer, Unemployment Filing, Pay Bill Center,
Printing, Copying and Fax services, Job search and Online
job applying, Notary Public.

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Natasha Beaubrun / CEO-OWNER

Name and Title: _____

Address 12460 SW 283th Street #A

Address: _____

Homestead, FL 33039

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:

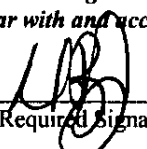
Name: Natasha Beabrun
Address: 12460 SW 283TH Street
Homestead, Florida 33039

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Natasha Beabrun
Address: 12460 SW 283TH Street
Homestead, Fl 33039

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

2-24-2014
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

2-24-2014
Date

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