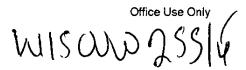
P15000037246

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



APR 2 7 2015



700271313937

04/06/15--01010--012 **78.75

15 APR 27 AH 11: 54



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 13, 2015

JACQUES BALYNCE 9050 PINES BLVD., SUITE 425 PEMBROKE PINES, FL 33024

SUBJECT: PILOT PROPERTY MANAGEMENT SERVICES, INC.

Ref. Number: W15000025516

We have received your document for PILOT PROPERTY MANAGEMENT SERVICES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Please return the corrected original and one copy of 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) 245-6052.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 115A00007277

COVER LETTER

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

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Jacques Balynce

Name (Printed or typed)

9050 Pines Blvd, Syite# 425

Address

Pembroke Pines, FL 33024

City, State & Zip

786-234-8242

Daytime Telephone number

Jebalynce & Yahoo. 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)

The name of the corporation shall be:	it property Managemen	of Services, Inc.	
ARTICLE II PRINCIPAL OFFICE	•		
Principal street addres	ss Mailing add	Mailing address, if different is:	
9050 Pinus Blvd			
Suite 425			
Pembroke Pines, FL	33024		
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Droperty Wanagements envices including maintenance, sepairs consulting General Contracting Real Estate related Services, Tangorte, export Services, mold related Services			
The purpose for which the corporation is organ	nized is: Oroperty Wanagement	Services	
including maintenan	yce, repairs consultiv	19 General	
Contracting Real Es	state related services 7	manité export	
Services unold relate	& Services	per of the	
		The second secon	
ARTICLE IV SHARES	1		
The number of shares of stock is:	000		
ARTICLE V INITIAL OFFICERS A	/ ND/OD DIDENTODS	No.	
AKTICIE V INCIDAD OFFICEAS A	21 Oresident	% 7 12 734 ±	
Name and Title: <u>Jacques</u>	Name and Title:		
Address <u>90'50 P (</u>	Address:		
Suite #	425		
Dembro 14	Pines \$133024	→	
	Si Kora Secretary Name and Title:		
Name and Title: Tranky A.	Name and Title:		
Address <u>9050 Piw</u>	05 Blvd Address:		
Suite# L	125		
Doubleak	e pines FL 33024		
- Pariolog	e prastiskig		
Name and Title:	Name and Title:		
Address	Address:		
		· · · · · · · · · · · · · · · · · · ·	

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT accept	able) of the registered agent is:
Name: Jacques Balynce	· · · · · · · · · · · · · · · · · · ·
Name: Jacques Balynce Address: 9050 pines Blydt	
pembroka pines, FL 3	3024
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: Jacques Balynu Address: 9050 Pines Blud #	 _
Address: 9050 Pins Blue #	425
Dombroke Pines Fl	33074
Having been named as registered agent to accept service of this certificate, I am familiar with and accept the appointmen	process for the above stated corporation at the place designated in nt as registered agent and agree to act in this capacity
The way	3/31/15
Required Signature/Registered Ag	ı
I submit this document and affirm that the facts stated her document to the Department of State complitutes a third degr	ein are true. I am aware that the false information submitted in a ree felony as provided for in s.817.155, F.S.
A June	3/31/15
Printed Signature/Incorporato	r Date
	,

* * * *