

P 15000042861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

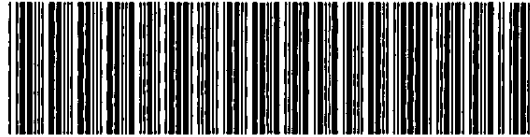
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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04/14/15--01013--022 **87.50

FILED
15 MAY 12 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J 5/13/15

COVER LETTER

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

SUBJECT: J-MACIAS SERVICES

(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: Jorge Luis Garcia de los Rios

Name (Printed or typed)

16240 SW 100 ct

Address

miami fl 33157

City, State & Zip

786-486-0076

Daytime Telephone number

jorgelkim77@gmail.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 MAY 12 PM 3:55

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NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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15 MAY 12 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 28, 2015

JORGE LUIS GARCIA DE LOS RIOS
16240 SW 100 CT
MIAMI, FL 33157

SUBJECT: J-MACIAS SERVICES
Ref. Number: W15000026639

We have received your document for J-MACIAS SERVICES and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 815A00008655

RECEIVED
15 MAY 12 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



15 APR 27 PM 12:23

FLORIDA DEPARTMENT OF STATE
Division of Corporations

ARY NE ST
33 E. FLORIDA

April 16, 2015

JORGE LUIS GARCIA DE LOS RIOS
16240 SW 100 CT
MIAMI, FL 33157

SUBJECT: J-MACIAS SERVICES
Ref. Number: W15000026639

We have received your document for J-MACIAS SERVICES and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

The registered agent must sign accepting the designation.

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.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 615A00007646

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15 MAY 12 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

15 MAY 12 PM 3:55

ARTICLE I NAME J-MACIAS SERVICES CORP
The name of the corporation shall be: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE
Principal street address _____

Mailing address, if different is: _____

16240 SW 100 CT

MIAMI FL, 33157

ARTICLE III PURPOSE ANY BUSINESS THAT MAKES MONEY
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JORGE LUIS GARCIA DE LOS RIOS, f _____ Name and Title: _____

Address 16240 SW 100 CT _____ Address: _____

MIAMI FL, 33157 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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 acceptable) of the registered agent is:

Name: JORGE LUIS GARCIA DE LOS RIOS
 Address: 16240 SW 100 CT
MIAMI FL,33157

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: YULEIVY ABADIN
 Address: 16240 SW 100 CT
MIAMI FL,33157

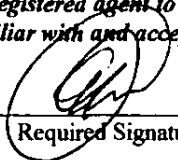
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

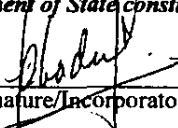


 Required Signature/Registered Agent

4/22/2015

 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

4/22/2015

 Date