

P15000049800

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

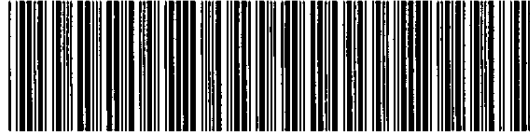
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/26/15--01005--014 **70.00

15 JUN -8 AM 10:46
Filing Office
Filing Office
Filing Office

W/15-37287 und 6/9

COVER LETTER

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

SUBJECT: ZULIE GENERAL CONSULTING & TAX 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 ☐ \$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: ROLAND R. PIERRE
Name (Printed or typed)

18005 NW 60TH PLACE
Address

MIAMI LAKES, FLORIDA 33015-5630
City, State & Zip

(786) 457-6365
Daytime Telephone number

ROLAND_PIERRE@YAHOO.COM
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 27, 2015

ROLAND R. PIERRE
18005 NW 60TH PLACE
MIAMI LAKES, FL 33015-5630

SUBJECT: ZULIE GENERAL CONSULTING & TAX SERVICES, INC.
Ref. Number: W15000037287

We have received your document for ZULIE GENERAL CONSULTING & TAX SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

The "Name Release" letter must be signed and notarized by the officer of the corporation.

The effective date is not acceptable since it is not within five working days of the date of receipt.

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.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 815A00011081

June 08, 2015

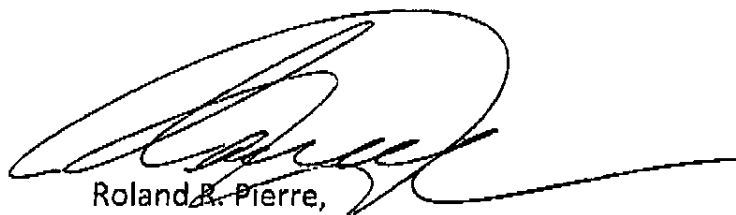
To Whom It May Concern:
Attn: Maryanne Dickey
Regulatory Specialist II
New Filing Section

15 JUN -8 AM 10:46
MDCHD
617-077-1000

Subject: ZULIE GENERAL CONSULTING & TAX SERVICES, INC.
Ref. Number: W15000037287

Please note that I have no intension to revoke dissolution and I am releasing the name to start a new corporation with the same name.

Sincerely yours,

A large, stylized handwritten signature in black ink, appearing to read 'Roland B. Pierre'.

Roland B. Pierre,
President.

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: ZULIE GENERAL CONSULTING & TAX SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

18005 NW 60TH PLACE

MIAMI LAKES, FLORIDA 33015-5630

Mailing address, if different is:

18005 NW 60TH PLACE

MIAMI LAKES, FLORIDA 33015-5630

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ROLAND R. PIERRE

Address 18005 NW 60TH PLACE

MIAMI LAKES, FLORIDA 33015-5630

Name and Title: ROLAND R. PIERRE

Address: 18005 NW 60TH PLACE

MIAMI LAKES, FLORIDA 33015

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

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: ROLAND R. PIERRE
Address: 18005 NW 60TH PLACE
MIAMI LAKES, FLORIDA 33015-5630

15 JUN -8 AM 10:46
FILED
CLERK OF DISTRICT COURT
JULIA A. HARRIS

ARTICLE VII INCORPORATOR

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

Name: ROLAND R. PIERRE
Address: 18005 NW 60TH PLACE
MIAMI LAKES, FLORIDA 33015-5630

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: MAY 15, 2015 (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
05/15/2015
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
05/15/2015
Date