

P15000051562

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

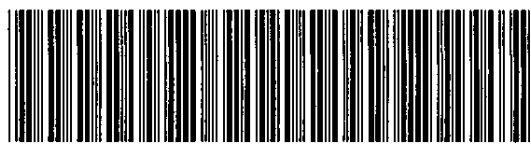
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/11/15--01011--005 **78.75

FILED
15 JUN 11 AM 7:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 15 2015
S. GILBERT

COVER LETTER

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

SUBJECT: JazMar 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 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Judith Santos
Name (Printed or typed)

7951 SW 152 Ave #1
Address

Miami FL 33193
City, State & Zip

(786) 474 5624
Daytime Telephone number

jsantos88@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)

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15 JUN 11 AM 7:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: Joe Moe Solutions Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

7951 SW. 152nd Ave #1
Miami FL 33193

Mailing address, if different is:

same as billing

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any and all legal business.

ARTICLE IV SHARES

The number of shares of stock is: 100.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Julien Tolanzo - President

Address: 7951 SW. 152nd Ave #1
Miami FL 33193

Name and Title: Judith Santos - Vice President

Address: 7951 SW. 152nd Ave #1
Miami FL 33193

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: Judith Santos
Address: 7951 SW. 152 Ave #1
Miami FL 33193

ARTICLE VII INCORPORATOR

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

Name: Judith Santos
Address: 7951 SW 152 Ave #1
Miami FL 33193

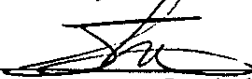
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: (same as 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.)

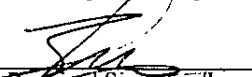
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

02/08/15
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

02/08/15
Date