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(Business Entity Name) (Document Number)	01/09/1701025026 **70.00		
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Office Use Only			
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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 10, 2017

JORGE POSADA 2780 NE 183RD ST #512 AVENTURA, FL 33160

SUBJECT: JP SERVICES, INC. Ref. Number: W17000002189

We have received your document for JP 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 an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L14000185786.

Please return 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.

Matthew T Moon Regulatory Specialist II

Letter Number: 417A00000595



www.sunbiz.org

Division of Comparations DO DOV (2007 Mollahorman Electric 2001)

## COVER LETTER

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

SUBJECT: \_\_\_\_\_

## (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 ST8.75 Filing Fee & Certificate of Status

<b>\$78.75</b>	<b>\$</b> 87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL CO	PY REQUIRED
~~ ~	

17 JAH 31 PH 5: 11

Jorge Posada FROM:

Name (Printed or typed)

2780 NE 183rd Street, #512

Address

Aventura, FL 33160

· City, State & Zip

386-868-9104

Daytime Telephone number

mayham.law@gmail.com

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

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

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

	<u>AE</u> eration shall be: <u>Posada Services, Inc.</u> <u>NCIPAL OFFICE</u>		
	Principa! <u>street</u> address	Mailing address,	if different is:
30 NE 183rd Stre	et, #512		
entura, FL 33160			
	h the corporation is organized is:		
mitted under the l	aws of the United States, the State of Flo	orida or any other state, county, territory	or union.
	·	11113	
	<u> </u>		<u> </u>
TICLE IV SIL e number of shares			
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Name and Title	 Name and Title	e:
Address	 Address:	

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name:	Jorge Posada	
Address:	2780 NE 183rd Street, #512	
	Aventura, FL 33160	

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jorge Posada Name: 2780 NE 183rd Street, #512 Address: Aventura, FL 33160

## 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 days prior or 90 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

quired Signature/Registered Agent

1. 25. 17 Date

17 Jul 31 Fil 541

I submit this document and affirm that thepfacts stated herein are true. I am aware that the false information submitted in a document to the Department of Same constructes a third degree folony as provided for in s.817.155, F.S.

Required Signature/Incorporator

1.25.17 Date