

P17000035000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

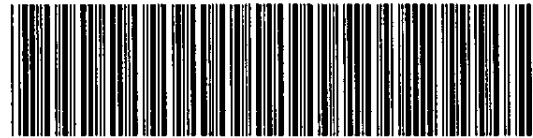
(Document Number)

Certified Copies _____

Certificates of Status _____

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Office Use Only



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03/27/17--01032--015 **78.75

FILED
17 APR 18 AM 8:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 29, 2017

WILMINE PIERRE
1434 NE 163RD ST., #112
NORTH MIAMI BEACH, FL 33162

SUBJECT: WILMA BEAUTY SALON AND TAXES SERVICES MORTGAGE INC
Ref. Number: W17000026741

We have received your document for WILMA BEAUTY SALON AND TAXES SERVICES MORTGAGE 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The document is illegible and not acceptable for imaging.

Please either type or re-write the forms in a more legible manor as we cannot read portions of the document and to have a more clean and legible document. Please print new form and redo.,

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.

KYLE D BRUMBLEY
Regulatory Specialist II

Letter Number: 117A00005972

COVER LETTER

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

SUBJECT: Wilma Beauty Salon and Tax Services Mortgage, 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

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

Pierre Wilmine

Name (Printed or typed)

1434 NE 163rd Suite 112

Address

North Miami Fl 33162

City, State & Zip

(321) 442 4850

Daytime Telephone number

wilmine00@hotmail.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)

ARTICLE I NAME

The name of the corporation shall be: Wilmas Beauty Salon and Tax Services, Mortgage, Inc

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
1434 NE 163~~th~~ St Suite 112
North Miami fl 33162

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Beauty Services, services taxes
Individual taxes, prepared, Business taxes, Income
Hair cut, Braid, Makeup permant, facial, manicure
pedicure, color, permant Relaxer Mixed. Services the
Realty State, finance Housing. . .

ARTICLE IV SHARES

The number of shares of stock is: 3 + 1 = 4

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Wilmine Pierre P
Address: 1434 NE 163 St
N. Miami fl 33162

Name and Title: Rose Dorrathie Augustin P.V
Address: 1434 NE 163 St 112
N. Miami fl 33162

Name and Title: Antonio Pierre Treasurer
Address: 1434 NE 163 St
N. Miami fl 33162

Name and Title: Roby Lubin Secretary
Address: 1434 NE 163 St
North Miami fl
33162

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: Wilmine Piene
Address: 1434 NE 163rd suite
1120, North Miami B fl 33162

ARTICLE VII INCORPORATOR

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

Name: Toni Renau
Address: 520 NW 165th suite 212 B
North Miami fl 33169

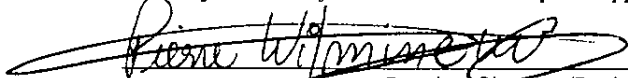
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 2/23/17 (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

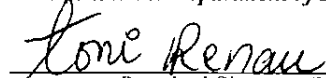


Required Signature/Registered Agent

2/23/17

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

2/23/17

Date