

10/2/2018

Division of Corporations

P18000082411

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : FLORIDA MULTISERVICES, INC.
Account Number : I20150000061
Phone : (786)290-3319
Fax Number : (305)645-2035

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
FJL SERVICE, CORP.**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

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10/3/18

Electronic Filing Menu

Corporate Filing Menu

Help

FILED
18 OCT -2 AM 9:46
SOUTH
FLORIDA

H 180002860293

FJL SERVICE, CORP.
2774 SW 31 PLACE
MIAMI, FL 33133

October 2, 2018

Florida Department of State

Division of Corporations
Attention: New Filings Section

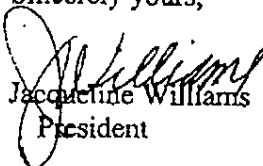
FILED
18 OCT -2 AM 9:45
SECRET
TALLAHASSEE

TO WHOM IT MAY CONCERN:

This is to advise you that the owners of FJL SERVICE, CORP., Document No. P17000084661 are the same owners of the attached articles of incorporation. That corporation is dissolved and we have no intent of reopening it.

Thank you for your help in this matter.

Sincerely yours,


Jacqueline Williams
President

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COVER LETTER

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

18 OCT -2 AM 9:46
TALLAHASSEE
FILING

SUBJECT: FJL SERVICE, CORP.

(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: JACQUELINE WILLIAMS

Name (Printed or typed)

2774 SW 31 PLACE

Address

MIAMI, FL 33133

City, State & Zip

(305)631-6666

Daytime Telephone number

fimultiservices@yahoo.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)

ARTICLE I NAME

The name of the corporation shall be: FJL SERVICE, CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

2774 SW 31 PLACE

MIAMI, FL 33133

Mailing address, if different is:

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: THREE HUNDRED SHARES NO PAR VALUE.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JACQUELINE WILLIAMS P

Address: 2774 SW 31 PLACE

MIAMI, FL 33133

Name and Title:

Address:

Name and Title: FRANCIS HERNANDEZ D

Address: 2774 SW 31 PLACE

MIAMI, FL 33133

Name and Title:

Address:

Name and Title: LECSA M CASTILLO D

Address: 2774 SW 31 PLACE

MIAMI, FL 33133

Name and Title:

Address:

H 18 000 2860 293

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CLERK OF DISTRICT COURT
JULIA R. GARCIA

H18 000 28 60 293

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: JACQUELINE WILLIAMS
Address: 2774 SW 31 PLACE
MIAMI, FL 33133

18 OCT - 2 AM 9:46
FALL 18

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JACQUELINE WILLIAMS
Address: 2774 SW 31 PLACE
MIAMI, FL 33133

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 10/01/2018 (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

Williams
Required Signature/Registered Agent

10/01/2018

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.

Williams
Required Signature/Incorporator

10/01/2018

Date

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