

P19 0000 749 80

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

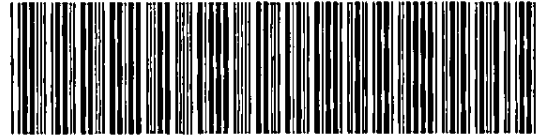
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OCT 07 2019

2019 OCT -4 AM 8:56
FILED

September 5, 2019


Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Ref: Company : JVM HOME SERVICES INC
Document # : P17000077515

I, Jose Vazquez-Meizoso, President of JVM Home Services Inc, Florida State Document # P17000077515, With the present I certified my no intention of revoking the Admin Dissolution on September 28, 2018. Therefore releasing the name for use to another entity.

If you have any question about this letter, please do not hesitate to contact me .

Sincerely

✓ 

Jose Vazquez-Meizoso
1252 SW 48TH Terrace
Deerfield Beach, FL 33442
(954) 630-5639



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 20, 2019

JOSE VAZQUEZ-MEIZOSO
1252 SW 48TH TERRACE
DEERFIELD BEACH, FL 33442

SUBJECT: JVM HOME SERVICES INC
Ref. Number: W19000085325

We have received your document for JVM HOME SERVICES 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.

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) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 719A00019520

RECEIVED

2019 OCT -4 PM 12:28

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COVER LETTER

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

SUBJECT: JVM HOME 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: JOSE VAZQUEZ-MEIZOSO

Name (Printed or typed)

1252 SW 48th TERRACE

Address

DEERFIELD BEACH FL 33442

City, State & Zip

(954)630-5639

Daytime Telephone number

FPYSERVICES@COMCAST.NET

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: JVM HOME SERVICES INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
1252 SW 48th TERRACE

DEERFIELD BEACH, FL 33442

Mailing address, if different is:

1252 SW 48th TERRACE

DEERFIELD BEACH, FL 33442

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ANY AND ALL ACTIVITY LEGAL BUSINESS PERMITTED IN FLORIDA STATE AND UNITED STATES OF
AMERICA

ARTICLE IV SHARES

The number of shares of stock is: 1000 ✓✓

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOSE VAZQUEZ-MEIZOSO P

Address 1252 SW 48th TERRACE
DEERFIELD BEACH, FL 33442

Name and Title: _____

Address: _____

Name and Title: JUAN D VAZQUEZ-CAUSILLA VP

Address 1252 SW 48th TERRACE
DEERFIELD BEACH, FL 33442

Name and Title: _____

Address: _____

Name and Title: JOSE VAZQUEZ-MEIZOSO TR/S

Address 1252 SW 48th TERRACE
DEERFIELD BEACH, FL 33442

Name and Title: _____

Address: _____

FILED
2019 OCT -4 AM 8:56
SECRETARY OF STATE
FLORIDA

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: JOSE VAZQUEZ-MEIZOSO _____

Address: 1252 SW 48th TERRACE _____

DEERFIELD BEACH, FL 33442 _____

ARTICLE VII INCORPORATOR

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

Name: JOSE VAZQUEZ - MEISOZO _____

Address: 1252 SW 48th TERRACE _____

DEERFIELD BEACH, FL 33442 _____


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

✓  _____
Required Signature/Registered Agent

09/05/2019 _____
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

09/05/2019 _____
Date