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Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : ITAX GROUP, LLC
Account Number : I20140000115
Phone : (813)882-8426
Fax Number : (813)884-0263

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

Email Address: NEARK1@icloud.com

FILED
DIVISION OF STATE
CORPORATIONS
10 OCT 31 PM 5:43

FLORIDA PROFIT/NON PROFIT CORPORATION
GENESIS 12 FLOORING SERVICES INC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

P19000081095

November 30, 2019

Re: GENESIS 12 FLOORING SERVICES INC, Document number P16000034343

To: Florida Department of State, Division of Corporation

I hereby attest to release the name GENESIS 12 FLOORING SERVICES INC to be filed to a new document, the officers are the same to be included in this new filing.

See Articles of Incorporation attached.

Regard,



NEARQUE DESOUZA MARTINS
President

COVER LETTER

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

SUBJECT: GENESIS 12 FLOORING 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
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: DESOUZA MARTINS, NEARQUE

Name (Printed or typed)

7032 Oakview Cir

Address

TAMPA, FL 33634

City, State & Zip

860-816-7649

Daytime Telephone number

neark1@icloud.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 NAMEThe name of the corporation shall be: GENESIS 12 FLOORING SERVICES INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

7032 Oakview CirTAMPA, FL 33634**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFULL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: DESOUZA MARTINS, NEARQUEName and Title: Tavares, MaiconAddress PRESIDENTAddress: DIRECTOR7032 Oakview Cir16338 Dinsdale DrTAMPA, FL 33634Spring Hill, FL 33634

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
IN THE OFFICE OF THE
CLERK OF THE CIRCUIT COURT
IN AND FOR THE COUNTY OF
HILLSBORO, FLORIDA
19 OCT 31 PM 5:43

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: DESOUZA MARTINS, NEARQUE
Address: 7032 Oakview Cir
TAMPA, FL 33634

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

Name: DESOUZA MARTINS, NEARQUE
Address: 7032 Oakview Cir
TAMPA, FL 33634

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DEPT. OF STATE
DIVISION OF CORPORATION
19 OCT 30 PM 5:53

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

10/30/2019
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

10/30/2019
Date