

P19000087457

Florida Department of State
Division of Corporations
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FALL RIVER, FL 33444
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FLORIDA PROFIT/NON PROFIT CORPORATION
THREE JS SERVICES INC

NOV 27 2019

T. SCOTT

Certificate of Status	0
Certified Copy	1
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Second Report

Florida Department of State
Attention: New Filings Section

To whom it may concern:

This is to advise that the owners of

THREE JS SERVICES INC

of Document # P18000052328

are the same owners of the attached articles. We have dissolved the company and have no intention of reopening it.

Thank you for your help in this matter.

Thanks,

JUAN J SARANILLO CLAVIJO
— PRESIDENT —

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: THREE JS SERVICES INC.**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address
10845 NW 50TH ST BLDG 3 APT 306DORAL, FL 33178

Mailing address if different is:

SAME**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: THE GENERAL NATURE OF THE BUSINESS AND OBJECTSAND PURPOSED TO BE TRANSACTED AND CARRIED ON BY THIS CORPORATION ARE TO DO ANY ANDALL OF THE THINGS HEREIN MENTIONED, AS FULLY AND TO THE SAME EXTENT AS NATURAL PERSONS
MIGHT DO:1) TRANSACT ANY AND ALL LAWFUL BUSINESS2) SAID CORPORATION SHALL FURTHER HAVE POWERSTO HAVE PERPETUAL SUCCESSION BY ITS CORPORATE NAME*ENRIQUETA D VARGAS SERVICES CORP**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: JUAN J. JARAMILLOName and Title: DPAddress: 10845 NW 50TH ST BLDG 3 APT 306

Address: _____

DORAL, FL 33178Name and Title: MARIO H. JARAMILLOName and Title: DVAddress: 10845 NW 50TH ST BLDG 3 APT 306

Address: _____

MIAMI, FL 33178

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

2019 NOV 26 AM 10:00
SECRETARY OF STATE
FALL AID 1538 E. F. 5100

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: JUAN J. JARAMILLO
Address: 10845 NW 50TH ST BLDG 3 APT 306
MIAMI, FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JUAN J. JARAMILLO
Address: 10845 NW 50TH ST BLDG 3 APT 306
MIAMI, FL 33178

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

Juan J. Jaramillo
Required Signature/Registered Agent

11/20/2019

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.

Juan J. Jaramillo
Required Signature/Incorporator

11/20/2019

Date