

3/12/2020

Division of Corporations

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 : WF TAXES AND MORE INC.
Account Number : I20200000043
Phone : (772)879-0010
Fax Number : (772)879-0150

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

Email Address: WFTAXES.MORE@GMAIL.COM

**FLORIDA PROFIT/NON PROFIT CORPORATION
JM SL MULTISERVICES INC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

COVER LETTER

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

SUBJECT: JM SL MULTISERVICES 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:** JM SL Multiservices Inc

Name (Printed or typed)

2050 SW Quarry St.

Address

Port Saint Lucie, FL 34953

City, State & Zip

561-388-3489

Daytime Telephone number

wftaxes.more@gmail.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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: Maira Y Erazo-Ramirez

Address: 2050 SW Quarry St
Port Saint Lucie, FL 34953

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Walter Gomez

Address: 508 SW Port Saint Lucie Blvd,
Port Saint Lucie, FL 34953

ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: 03/11/2020 (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	_____ 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	_____ Date
--	---------------

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

ARTICLE I NAMEThe name of the corporation shall be: JM SL MULTISERVICES INC**ARTICLE II PRINCIPAL OFFICE**Principal street address2050 SW Quarry St.
Port Saint Lucie, FL 34953

Mailing address, if different is:

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: All legal business**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Maira Y Erazo-Ramirez, President

Name and Title: _____

Address 2050 SW QUARRY ST

Address: _____

PORT ST LUCIE, FL 34953

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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

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Maira Erazo

Required Signature/Registered Agent

3/11/2020

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.

Walter Gomez

Required Signature/Incorporator

03-11-2020

Date

FILED
 2020 MAR 12 AM 9:20
 TALLAHASSEE, FL 32309