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JULIO MORAN SERV

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H20000174003 3)))



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

From:
Account Name : JULIO MORAN MULTI-SERVICES, CORP.
Account Number : I20190000059
Phone : (305)643-3922
Fax Number : (305)643-3211

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20 JUN -9 PM 2:32
TALLAHASSEE, FLORIDA

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

Email Address: rodolformaldonado42@gmail.com

**FLORIDA PROFIT/NON PROFIT CORPORATION
M R ENTERPRISES SERV. CORP**

Certificate of Status	0
Certified Copy	0
Page Count	01
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Corporate Filing Menu

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JUN 10 2020

M R Enterprises Serv. Corp

Fax: 305-643-3211

Miami, FL June 09, 2020

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COVER LETTER

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

SUBJECT: M R ENTERPRISES SERV. 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: RODOLFO MALDONADO

Name (Printed or typed)

1980 SW 6 STREET, # 5

Address

MIAMI, FL 33135

City, State & Zip

786-385-1398

Daytime Telephone number

rodolfomaldonado42@gmail.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 M R ENTERPRISES SERV. CORP.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is: _____

1980 SW 6 STREET, # 5

MIAMI, FL 33135

ARTICLE III PURPOSE

PLASTER CONSTRUCTION

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

100

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RODOLFO MALDONADO / PRESID.

Name and Title: _____

Address 1980 SW 6 STREET, # 5

Address: _____

MIAMI, FL 33135

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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CLERK OF DISTRICT COURT
MIAMI, FL 33101

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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: RODOLFO MALDONADO
 Address: 1980 SW 6 STREET, # 5
 MIAMI, FL 33135

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: RODOLFO MALDONADO
 Address: 1980 SW 6 STREET, # 5
 MIAMI, FL 33135

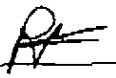
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 TALLAHASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE: JUNE 08, 2020 (OPTIONAL)
 Effective date, if other than the date of filing: _____

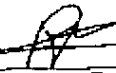
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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

 _____ JUNE 08, 2020
 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.

 _____ JUNE 08, 2020
 Required Signature/Incorporator Date

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