

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H200003118573)))



H200003118573ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

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

From:
Account Name : KIJONNA SERVICES INC
Account Number : I2008000033
Phone : (305)644-3055
Fax Number : (305)644-3052

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

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
KEN MULTISERVICES INC**

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

C RICO
SEP - 8 2020

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

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

SUBJECT: KEN 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: KAREN JERGES
Name (Printed or typed)

2080 SW 152ND PL
Address

MIAMI, FLORIDA 33185
City, State & Zip

786-253-9893
Daytime Telephone number

YEIIVERGES@GMAIL.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 NAME

The name of the corporation shall be: KEM MULTISERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
2080 SW 152 ND PL
Miami, Florida 33185

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ALL PROPOSE

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KAREN VERGES P Name and Title: _____

Address 2080 SW 152 ND PL Address: _____

Miami, FL 33185

Name and Title: EVELA GONZALEZ VP Name and Title: _____

Address 2080 SW 152 ND P. Address: _____

Miami, FL 33185

Name and Title: CARMEN M DUFFOUL D Name and Title: _____

Address 2080 SW 152 ND PL Address: _____

Miami, FL 33185

20 SEP - 8 AM 11:30
 OFFICE
 2080 SW 152 ND PL
 MIAMI, FL 33185

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: Karen Verges
 Address: 2080 SW 152 ND PL
Miami Florida 33185

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: KAREN VERGES
 Address: 2080 SW 152 ND PL
Miami, FL 33185

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 09/08/2020 (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

Karen Verges 09/08/2020
 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.

Karen Verges 09/08/2020
 Required Signature/Incorporator Date