

P21000020106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

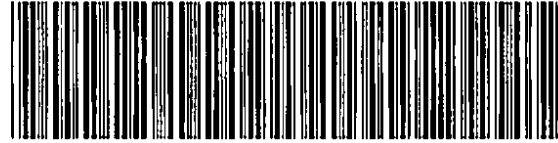
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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P. WHITE

MAR 08 2021

FILED

COVER LETTER

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

11 10:10

SUBJECT: Abrahamic Painting 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: Isaac Gilles
Name (Printed or typed)

2025 NE 164 Street Apt# 417
Address

North Miami Beach, Florida 33162
City, State & Zip

(786) 985-1049
Daytime Telephone number

exagilles27@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: Abrahamic Painting Services, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:
Same as previously stated

2025 NE 164 Street Apt 417

North Miami Beach, Florida 33162

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of my Business is to provide services
Painting & Cleaning Services to the community. I will make sure that I provide
excellent and satisfactory services.

ARTICLE IV SHARES

The number of shares of stock is: 25

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Isaac Gilles (Director)

Name and Title: Judithe Gilles Exama (Secr.)

Address 2025 NE 164 Street
North Miami Beach, FL. 33162

Address: 2025 NE 164 Street
North Miami Beach, Fl. 33162

Name and Title: None

Name and Title: None

Address _____

Address: _____

Name and Title: None

Name and Title: None

Address _____

Address: _____

Name and Title: Isaac Gilles (President)

Judithe Gilles Exama(Secretary)

Name and Title: _____

Address 2025 NE 164 Street Apt 417

Address: 2025 NE 164 Street Apt 417

North Miami Beach, Florida 33162

North Miami Beach, Florida 33162

ARTICLE VI REGISTERED AGENT

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

Name: Isaac Gilles

Address: 2025 NE 164 Street Apt 417

North Miami Beach, Florida 33162

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Isaac Gilles

Address: 2025 NE 164 Street Apt 417

North Miami Beach, FL. 33162

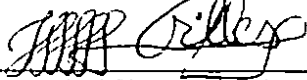
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: March 1st 2021 (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

2/10/21

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

2/10/21

Date