

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

P21000131547382

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((H210001315473))



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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
CP RENOVATION SERVICES, INC**

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

2021 APR -2 AM 10:53

2021 APR -2 PM 2:42

4/5/21
30

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Electronic Filing Menu

Corporate Filing Menu

Help

Apr. 1. 2021 4:25PM

No. 0370 P. 5

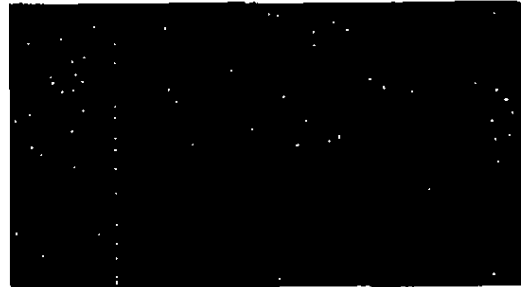
COVER LETTER

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

SUBJECT: CP RENOVATION 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 \$78.75
Filing Fee Filing Fee
 & Certificate of Status



FROM: KIJOENNA SERVICES, INC
 Name (Printed or typed)

2141 SW 1 ST SUITE 110
 Address

MIAMI, FL 33135
 City, State & Zip

7864997132
 Daytime Telephone number

KRISJOENNA@YAHOO.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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2021 APR -2 PM 2:42
TALLAHASSEE, FL
CLERK OF SUPERIOR COURT

Apr. 1. 2021 4:25PM

No. 0370 P. 6

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: CP RENOVATION SERVICES, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

20888 NW FIRST ST

PEMBROKE PINES, FL 33029

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: CARLOS PIRELA

P

Name and Title:

Address 20888 NW FIRST ST

Address:

PEMBROKE PINES, FL 33029

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

2021 APR -2 PM 2:42

Apr. 1. 2021 4:25PM

No. 9370 P. 7

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: CARLOS PIRELA
Address: 20888 NW FIRST ST
PEMBROKE PINES, FL 33029

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: PIRELA CARLOS
Address: 20888 NW FIRST ST
PEMBROKE PINES, FL 33029

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 04/01/2021 (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

Carlos Pirela
Required Signature/Registered Agent

04/01/2021
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.

Carlos Pirela
Required Signature/Incorporator

04/01/2021
Date

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