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(Requestor's Name)

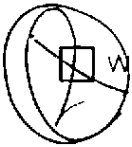
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PICK-UP



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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2021 APR 21 AM 10:19

COVER LETTER

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

SUBJECT: **OK ENVIOS & SUPPLIES 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

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: **LUIGI V. GALLO-MEJIA**

Name (Printed or typed)

8203 NW 70TH ST

Address

MIAMI, FL 33166

City, State & Zip

866-296-1833

Daytime Telephone number

INFO@JCBSOLUTIONSINC.NET

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 OK ENVIOS & SUPPLIES CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

8213 NW 70TH ST
MIAMI FL 33166

Mailing address, if different is:

8203 NW 70TH ST
MIAMI FL 33166

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LUIGI V. GALLO-MEJIA / PRESIDENT

Address: 5171 NW 85TH AVE
DORAL, FL 33166

Name and Title: JUAN V. DAVILA-OLIVER / VP

Address: 8203 NW 70TH ST
MIAMI, FL 33166

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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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 JC BUSINESS SOLUTIONS INC
Address 7500 NW 25TH ST SUITE 237
DORAL, FL 33122

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name LUIGI V. GALLO-MEJIA
Address 5171 NW 85TH AVE
DORAL, FL 33166

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 04/20/2021 (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
04/20/2021
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.

Required Signature, Incorporator
04/20/2021
Date