

6/17/2021

Division of Corporations  
 Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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

From:  
 Account Name : KML MULTISERVICES CORP  
 Account Number : I20200000044  
 Phone :  
 Fax Number (786)537-3766  
 : (305)402-3837

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

Email Address: KMLMULTISERVICESCORP@GMAIL.COM

CLERK OF STATE  
FAIRLHASSEE, FLORIDA

2021 JUN 25 AM 11: 27

2021 JUN 25 PM 3: 47

FILED

**FLORIDA PROFIT/NON PROFIT CORPORATION  
YEIFASHIONWEAR CORP**

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JUN 28 2021

T. SCOTT

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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: YEIFASHIONWEAR CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7525 E. TREASURE DR APT 906  
NORTH BAY VILLAGE FL 33141

\_\_\_\_\_  
\_\_\_\_\_

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ALL LAWFUL BUSINESS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: YEILY JIMENEZ SANCHEZ (P) Name and Title: \_\_\_\_\_

Address: 7525 E. TREASURE DR APT 906 Address: \_\_\_\_\_  
NORTH BAY VILLAGE FL 33141 \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2021 JUN 25 AM 11:27  
COUNTY OF FLORIDA  
TALLAHASSEE

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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: KML MULTISERVICES CORP  
 Address: 8249 NW 36TH ST SUITE 212  
DORAL FL 33166

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: YEILY JIMENEZ SANCHEZ  
 Address: 7525 E TREASURE DR APT 906  
NORTH BAY VILLAGE FL 33141

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (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

Katherine Caicedo 06/25/2021  
 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.

YEILY JIMENEZ SANCHEZ 06/25/2021  
 Required Signature/Incorporator Date

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