

6/17/2021

Division of Corporations

2100060038

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

(((H21000239674 3)))



H210002396743ABC1

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 : 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
FAIRHURST, FLORIDA

2021 JUN 25 AM 11:27

2021 JUN 25 PM 3:47

FILED

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

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

JUN 28 2021

T. SCOTT

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

(((H21000239674 3)))

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

SUBJECT: YEIFASHIONWEAR 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
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: YEIFASHIONWEAR CORP
Name (Printed or typed)

7525 E TREASURE DR APT 906
Address

NORTH BAY VILLAGE FL 33141
City, State & Zip

(305) 680-7352
Daytime Telephone number

KMLMULTISERVICESCORP@GMAIL.COM
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

(((H21000239674 3)))

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe 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 906NORTH 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
CLERK OF STATE
TALLAHASSEE, FLORIDA

(((H21000239674 3)))

(((H21000239674 3)))

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe 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 INCORPORATORThe 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

Required Signature/Registered Agent

06/25/2021

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.

YEILY JIMENEZ SANCHEZ

Required Signature/Incorporator

06/25/2021

Date

(((H21000239674 3)))