

9/7/2021

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Division of Corporations

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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 : YOUR DREAM SERVICES CORP.
Account Number : 120200000137
Phone : (786)660-0108
Fax Number : (786)364-1047

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

Email Address: info@yourdreamms.com

FLORIDA PROFIT/NON PROFIT CORPORATION
JY Floors Installation Corp

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

Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

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

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SUBJECT: JY Floors Installation 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: Jorge Alberto Yepes Velez
Name (Printed or typed)13371 Sw 90th Ter Unit B
AddressMiami, Florida 33186
City, State & Zip786-230-0007
Daytime Telephone numberjorgeyvez@hotmail.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 SEP 17 PM 16:25

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

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ARTICLE I NAMEThe name of the corporation shall be: JY Floors Installation Corp**ARTICLE II PRINCIPAL OFFICE**Principal street address13371 Sw 90th Ter Unit BMiami, Florida 33186

Mailing address, if different is

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: Construction and remodeling, Cleaning, Printing**ARTICLE IV SHARES**The number of shares of stock is 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Jorge Yeps - President

Name and Title: _____

Address: 13371 Sw 90th Ter Apt B

Address: _____

Miami, Florida 33186

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

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: Your Dream Multiservices Corp
Address: 8300 Nw 53rd St Suite 350
Miami, Florida 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jorge Yepes
Address: 13371 Sw 90th Ter Apt B
Miami, Florida 33186

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

Isamar Torres
Required Signature/Registered Agent

09/07/2021
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.

Jorge A. Yepes
Required Signature/Incorporator

09/07/2021
Date

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