

P21000092020

(Requestor's Name)

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☐ PICK-UP

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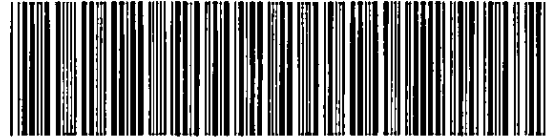
(Business Entity Name)

(Document Number)

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2/21 SEP 28 PM 7:30

W21-125477



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 16, 2021

MICHAEL DIROFF
225 JENNIFER DRIVE
ROTONDA WEST, FL 33947

SUBJECT: M AND K HANDYMAN SERVICES, INC
Ref. Number: W21000125477

2021 SEP 28 PM 7:30

We have received your document for M AND K HANDYMAN SERVICES, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L13000011988.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE
Regulatory Specialist II

Letter Number: 421A00022443

2021 SEP 23 AM 11:03

COVER LETTER

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

SUBJECT: DIROFF
~~MAK~~ HANDYMAN 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

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

ADDITIONAL COPY REQUIRED

FROM: MICHAEL DIROFF
Name (Printed or typed)

225 JENNIFER DRIVE
Address

ROTONDA WEST FL 33947
City, State & Zip

248-431-4558
Daytime Telephone number

K.diroff92269@yahoo.com
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:

~~DIROFF~~
~~M and K~~ Handyman SERVICES, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

225 JENNIFER Drive
ROTONDA WEST FL 33947

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: RESIDENTIAL and Commercial
property maintenance service

ARTICLE IV SHARES

The number of shares of stock is: 60,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MICHAEL DIROFF Name and Title: _____
PRESIDENT

Address: 225 JENNIFER DRIVE Address: _____
ROTONDA WEST, FL
33947

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

211 SE 28th Ave
7:30

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: MICHAEL DIROFF
Address: 225 JENNIFER DRIVE
ROTONDA WEST FL 33947

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: MICHAEL DIROFF
Address: 225 JENNIFER DRIVE
ROTONDA WEST FL 33947

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: SEPTEMBER 15, 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

[Signature]
Required Signature/Registered Agent

9/11/2021
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.

[Signature]
Required Signature/Incorporator

9/11/2021
Date