

P22000015387
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H22000076298 3)))



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To: Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
ALEX JI CORP

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

HL

2022 FEB 28 PM 3:21

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

SUBJECT: ALEX JI 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: FELIPE MONTESINO SOSA

Name (Printed or typed)

6825 SW 154th CT.

Address

MIAMI, FL 33193

City, State & Zip

(786) 314-2318

Daytime Telephone number

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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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: ALEX JI CORP.**ARTICLE II PRINCIPAL OFFICE**Principal street address6825 SW 154th CTMIAMI, FL 33193

Mailing address, if different is:

SAME ADDRESS**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: FELIPE MONTESINO SOSA, P

Address

6825 SW 154th CTMIAMI, FL 33193

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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TALLAHASSEE, FLORIDA

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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: FELIPE MONTESINO SOSA
Address: 6825 SW 154th CT
MIAMI, FL 33193

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: FELIPE MONTESINO SOSA
Address: 6825 SW 154th CT
MIAMI, FL 33193

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TALLAHASSEE, FLORIDA

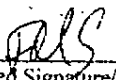
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 02/28/2022 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business 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

02/28/2022

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

02/28/2022

Date

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