

**P22000019958**

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.**

((H22000096063 3)))



H22000096063ABC

**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 : KIJJOENNA SERVICES INC  
Account Number : 120080000033  
Phone : (305)644-3055  
Fax Number : (305)644-3052

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

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

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**TWEN'S MCA INC**

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

4/16

SECRETARY OF STATE  
JALAHN ASSET, FLORIDA

2022 MAR 16 PM 10:46

FILED

2022 MAR 16 AM 11:13



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

## INSTRUCTIONS FOR A PROFIT CORPORATION

The following are instructions, a cover letter and sample articles of incorporation pursuant to Chapter 607 and 621 Florida Statutes (F.S.).

**NOTE: THIS IS A BASIC FORM MEETING MINIMAL REQUIREMENTS FOR FILING ARTICLES OF INCORPORATION.**

The Division of Corporations strongly recommends that corporate documents be reviewed by your legal counsel. The Division is a filing agency and as such does not render any legal, accounting, or tax advice.

This office does not provide you with corporate seals, minute books, or stock certificates. It is the responsibility of the corporation to secure these items once the corporation has been filed with this office.

Questions concerning S Corporations should be directed to the Internal Revenue Service by telephoning 1-800-829-1040. This is an IRS designation, which is not determined by this office.

A preliminary search for name availability can be made on the Internet through the Division's records at [www.sunbiz.org](http://www.sunbiz.org). Preliminary name searches and name reservations are no longer available from the Division of Corporations. You are responsible for any name infringement that may result from your corporate name selection.

Pursuant to Chapter 607 or 621 F.S., the articles of incorporation **must** set forth the following:

Article I: The name of the corporation **must** include a corporate suffix such as Corporation, Corp., Incorporated, Inc., Company, or Co.

A Professional Association **must** contain the word "chartered" or "professional association" or "P.A.".

Article II: The principal place of business and mailing address of the corporation. The principal address **must** be a street address. The mailing address, if different, can be a P.O. Box address.

Article III: **Specific Purpose for a "Professional Corporation"**

Article IV: The number of shares of stock that this corporation is authorized to have **must** be stated.

FILED  
2022 MAR 16 PM 10:46  
SECURARY  
CLERK  
ALLIANCE  
OFFICE

Article VI: The name and **Florida Street address** (P.O. Box **NOT** acceptable) of the initial Registered Agent. The Registered Agent must sign in the space provided and type or print his/her name accepting the designation as registered agent.

Article VII: The name and address of the Incorporator. The Incorporator must sign in the space provided and type or print his/her name below signature.

The "incorporator" is the person who prepares and signs the Articles of Incorporation and then submits them for filing to the Division of Corporations. The function of the incorporator usually ends after the corporation is filed.

**An Effective Date:** Add a separate article if applicable or necessary: An effective date may be added to the Articles of Incorporation, otherwise the date of receipt will be the file date. (An effective date can not be more than five (5) days prior to the date of receipt or ninety (90) days after the date of filing). If a corporation is filed anytime prior to December 31<sup>st</sup>, an annual report will be due on January 1<sup>st</sup>.

**Important Information About the Requirement to File an Annual Report**

All Florida Profit Corporations must file an Annual Report yearly to maintain "active" status. The first report is due in the year following formation. The report must be filed electronically online between January 1<sup>st</sup> and May 1<sup>st</sup>. The fee for the annual report is \$150. After May 1<sup>st</sup> a \$400 late fee is added to the annual report filing fee. "Annual Report Reminder Notices" are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1<sup>st</sup>, go to our website at [www.sunbiz.org](http://www.sunbiz.org). There is no provision to waive the late fee. Be sure to file before May 1<sup>st</sup>.

\*\*\*\*\*

**The fee for filing a profit corporation is:**

Filing Fee	\$35.00
Designation of Registered Agent	\$35.00
Certified Copy (optional)	\$ 8.75 (plus \$1 per page for each page over 8, not to exceed a maximum of \$52.50).
Certificate of Status (optional)	\$ 8.75

**Make checks payable to: Florida Department of State**

**Mailing Address:**

New Filing Section  
Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314  
(850) 245-6052

**Street Address:**

New Filing Section  
Department of State  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303  
(850) 245-6052

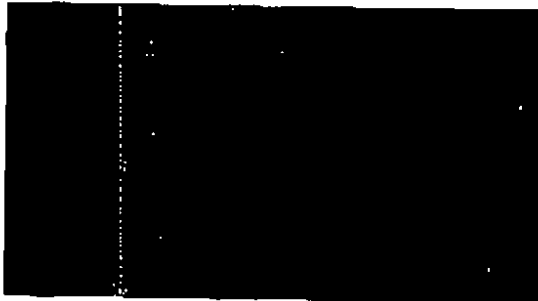
COVER LETTER

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

SUBJECT: TWIN'S MCA 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



FROM: KIJOENNA SERVICES, INC  
Name (Printed or typed)  
2141 SW 1 ST SUITE 110  
Address  
MIAMI, FL 33135  
City, State & Zip  
7864997132  
Daytime Telephone number  
KRISJOENNA@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

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

ARTICLE I NAMEThe name of the corporation shall be: TWIN'S MCA INCARTICLE II PRINCIPAL OFFICEPrincipal street address  
1500 NE 117 TH ST

Mailing address, if different is:

MIAMI FL 33161ARTICLE III PURPOSEThe purpose for which the corporation is organized is: ANY AN ALL LAWFULL BUSINESSARTICLE IV SHARESThe number of shares of stock is: 100ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: CLAUDIA M HERRERA HERRERA P

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

Address 1500 NE 117 TH ST

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

MIAMI, FL 33161

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2022 MAR 16 PM 10:47

FILED

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: HERRERA HERRERA CLAUDIA M  
 Address: 1500 NE 117 TH ST  
MIAMI, FL 33161

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: CLAUDIA M HERRERA HERRERA  
 Address: 1500 NE 117 TH ST  
MIAMI, FL 33161

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 03/14/2022 (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*

Claudia Herrera \_\_\_\_\_ 03/14/2022  
 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.*

Claudia Herrera \_\_\_\_\_ 03/14/2022  
 Required Signature/Incorporator Date

FILED  
 2022 MAR 16 PM 10:17  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA