

P22000026637Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : S&S ACCOUNTING SERVICES, INC.
Account Number : I20190000091
Phone : (786)212-0491
Fax Number : (305)454-6657SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
RFJ MULTISERVICES INC

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

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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: RFJ MULTISERVICES INC**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address16004 SW 87TH TERR
MIAMI, FL 33193

Mailing address, if different is:

ARTICLE III PURPOSEThe 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: MARIA R. HERNANDEZ RIVAS, P

Name and Title: _____

Address 16004 SW 87TH TERR

Address: _____

MIAMI, FL 33193

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

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TALLAHASSEE, FLORIDA

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: MARIA R. HERNANDEZ RIVAS

Address: 16004 SW 87TH TERR

MIAMI, FL 33193

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: S&S ACCOUNTING SERVICES, INC.

Address: 3383 NW 7 ST SUITE 304

MIAMI, FL 33125

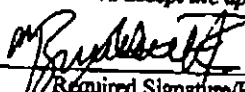
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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

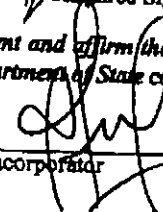
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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*


 Required Signature/Registered Agent

04/07/22
 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

04/07/22
 Date