Electronic Filing Cover Sheet

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(((H22000174672 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : ARIMIR SERVICES GROUP LLC

Account Number : I20200000022 Phone : (305)298-6579 Fax Number : (305)643-5225

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

FLORIDA PROFIT/NON PROFIT CORPORATION JP RACKS SOLUTIONS CORP

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Corporate Filing Menu

Help

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

ARTICLE II				
Principal street address		Mailing a	Mailing address, if different is:	
3170 SW 4 ST	33135			
WHAWH, FL.,	73133		<u> </u>	
ARTICLE III The purpose for	<u>PURPOSE</u> which the corporation is organized is:	ANY AND ALL LAWFUL BUSIN	ESS	
	·	<del></del>		
ARTICLE IV The number of sh	SHARES ares of stock is: 100			
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Name and	Title:	Name and Title:	
Address		Address:	<u></u>
	<del></del>		
	<i>EGISTERED AGENT</i> rida <u>street address</u> (P.O. Box NOT accepta	ble) of the registered agent	
is:	Maria del Carmen Ramirez		
Name:	3170 SW 4 ST		
Address:	31703# 431		
Address.	MIAMI, FL 33135		
ARTICLE VII II	NCORPORATOR		
The name and add	dress of the Incorporator is:		
Name:	Maria del Carmen Ramirez	<u>-</u>	
Address:	3170 SW 4 ST		
Vante22	Miami, FL 33135		
ARTICLE VIII E	FFECTIVE DATE:		2022
Effective date, if other	ner than the date of filing:	(OPTIONAL)	<del>بر−</del> مئ
(If an effective date filing.)	e is listed, the date must be specific and ca	nnot be more than five days pr	ior or 90 days after the
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	serted in this block does not meet the applica ctive date on the Department of State's recor		
the document 3 ene	ctive date on the Department of State 3 recor	us.	PH F
17		and the state of t	<u>`</u> '\
certificate. I am fam	as registered agent to accept service of proce, iliar wife and accept the appointment as regi	ss for the above stated corporation stered agent and agree to act in th	n at the place designated in this his capacity
servyroute, I amy am	1////	or to agon and agree to account	
	MUC		3/16/22
	Required Signature/Registered Agent	<del></del>	Date
	ent and affirm that the facts stated herein t		
document to the Dep	artificate of State constitutes a third degree fe	lony as provided for in s.817.155,	F.S.
	NIK		5/14/22
Required Signature/I	ncorporator	Date	