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Florida Department of State
Division of Corporations
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((H22000211899 3)))



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To:

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

From:

Account Name : JABBASH LLC
Account Number : I20220000113
Phone : (407)434-0012
Fax Number : (321)577-1025

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

Email Address: BlessedTeaminfo@protonmail.com

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FLORIDA
COMMERCIAL
DIVISION

**FLORIDA PROFIT/NON PROFIT CORPORATION
RIVERMAYUNITED, INC.**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

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Corporate Filing Menu

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COVER LETTER

((H22000211899 3)))

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

SUBJECT: RIVERMAYUNITED, 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

2022 JUL 20 AM 11:18

FILED

FROM: Lesbia Segura

Name (Printed or typed)

3321 S ORANGE BLOSSOM TRAIL #206

Address

Kissimmee, FL 34746

City, State & Zip

407-434-0012

Daytime Telephone number

BlessedTeaminfo@protonmail.com

E-mail address: (to be used for future annual report notification)

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

((H22000211899 3)))

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

((H22000211899 3)))

ARTICLE I NAME

The name of the corporation shall be: RIVERMAYUNITED, INC.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
3461 NW 44TH ST. UNIT 105

Mailing address, if different is:

LAUDERDALE LAKES, FL 33309

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: MELBA LUZ RIVERA, P

Address: 3461 NW 44TH ST. UNIT 105

LAUDERDALE LAKES, FL 33309

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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CLERK OF DISTRICT COURT
JUL 20 2022

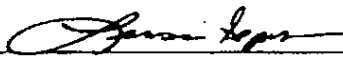
((H22000211899 3)))

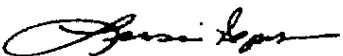
Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:Name: Lesbia SeguraAddress: 3321 S ORANGE BLOSSOM TRAIL #206Kissimmee, FL 34746**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: Lesbia SeguraAddress: 3321 S ORANGE BLOSSOM TRAIL #206Kissimmee, FL 34746**ARTICLE VIII EFFECTIVE DATE:**Effective date, if other than the date of filing: June 12, 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*

Required Signature/Registered AgentJune 12, 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/IncorporatorJune 12, 2022
Date