

P2200081677

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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(((H22000360617 3)))



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

From:
Account Name : KIJONNA SERVICES INC
Account Number : I20080000033
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: _____

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2022 OCT 24 AM 7:55

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FLORIDA PROFIT/NON PROFIT CORPORATION
G VALDES CORP SERVICES INC

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| Certificate of Status | 0 |
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T. SCOTT

OCT 25 2022

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Corporate Filing Menu

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October 21, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

KIJOENNA SERVICES INC

SUBJECT: VALDES CORP SERVICES INC
REF: W22000133639

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

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Dil Sultana
Regulatory Specialist II

FAX Aud. #: H22000360617
Letter Number: 522A00023706

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

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

SUBJECT: G. VALDES CORP SERVICES, 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

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.

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

ARTICLE I NAME

The name of the corporation shall be: G VALDES CORP SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3069 NW 57 TH ST

MIAMI FL 33142

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AN ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: GEORGE DANIEL VALDES

P

Name and Title: _____

Address

3069 NW 57TH ST

Address: _____

MIAMI FL 33142

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

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2022 OCT 24 AM 7:20
CLERK OF THE COURT
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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: GEORGE DANIEL VALDES

Address: 3069 NW 57 TH ST

MIAMI FL 33142

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: GEORGE DANIEL VALDEZ

Address: 3069 NW 57 TH ST

MIAMI FL 33142

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 10/24/22 (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

George Valdes

Required Signature/Registered Agent

10/24/22

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.

George Valdes

Required Signature/Incorporator

10/24/22

Date