Electronic Filing Cover Sheet

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	Division of Corporations		
	Fax Number : (850)617-63.	31	
Fro	m:		
	Account Name : WISE TAX FI	RM INC.	
	Account Number : I2021000001		
	Phone : (786)620-000)1	\mathbf{z}_{\cdot}
	Fax Number ; (786)227-66	1	23 FEB - 7 SECRETURE THAT SEE FOR FURSE PLEASE. **

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	IP SERVIC	ES INC	
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Corporate Filing Menu

Help





February 6, 2023

FLORIDA DEPARTMENT OF STATE
Division of Corporations

WISE TAX FIRM INC.

SUBJECT: IP SERVICES INC

REF: W23000016012

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 covernsheet.

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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If you have any questions concerning the filing of your document, please call (850) 245-6052.

Dil Sultana Regulatory Specialist II

FAX Aud. #: E23000045575 Letter Number: 023A00002829

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

H230000455753

ARTICLE 1 NAME: The name of the corporation is:

	IP 1 SERVICES INC
	ARTICLE II PRINCIPAL OFFICE:
	The principal street address and mailing address is:
	5913 SW147TH PLACE
	MIAMI, FLORIDA 33193
ARTICLE III	SHARES: The number of shares of stock is: 100
ARTIC	LE IV INITIAL DIRECTORS AND/OR OFFICERS:
<u> </u>	RAMON RODRIGUEZ
<u></u>	
_	TALL
	PAE H
· -	
ARTICLE V	INITIAL REGISTERED AGENT AND STREET ADDRESS:
	orida street address (PO Box not acceptable) of the registered agent is:
	RAMON RODRIGUEZ
	5913 SW 147TH PLACE
	MIAMI, FLORIDA 33193
ARTICLE VI	INCORPORATOR: The name and address of the Incorporator is:
	RAMON RODRIGUEZ
	5913 SW 147TH PLACE
	MIAMI, FLORIDA 33193

FILED

Required Signatures:

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

Registered Agent

2/3/2023

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.

Incorporator

13/2023

Date

FILED
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