

p23000038765

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000181956 3)))



H230001819563ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

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

From: Account Name : KIJJOENNA 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: _____

2013 MAY 16 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

FLORIDA PROFIT/NON PROFIT CORPORATION
INTEGRAL ELECTRICAL SERVICES SOLUTION INC

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

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

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

SUBJECT: INTEGRAL ELECTRICAL SERVICES SOLUTION 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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
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.

SECRETARY OF STATE
TALLAHASSEE, FL

2023 MAY 16 PM 2:07

FILED

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: INTEGRAL ELECTRICAL SERVICES SOLUTION INC**ARTICLE II PRINCIPAL OFFICE**Principal street address1085 NW 131 ST STNORTH MIAMI FL 33168

Mailing address, if different is:

ARTICLE III PURPOSEThe 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: JOHAN MANUEL ALVARADO

P

Name and Title:

Address 1085 NW 131 ST ST

Address:

NORTH MIAMI FL 33168

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

FILED
2023 MAY 16 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FL

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

_____**ARTICLE VI REGISTERED AGENT**The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:Name: JOHAN MANUEL ALVARADOAddress: 1085 NW 131 ST STNORTH MIAMI, FL 33168**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: JOHAN MANUEL ALVARADOAddress: 1085 NW 131 ST ST**ARTICLE VIII EFFECTIVE DATE:**Effective date, if other than the date of filing: 05/16/2023 (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*Johan Manuel Alvarado
Required Signature/Registered Agent05/16/23

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.*Johan Manuel Alvarado
Required Signature/Incorporator05/16/23

Date

2023 MAY 16 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FL

FILED