

P24000006294

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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☐

MAIL

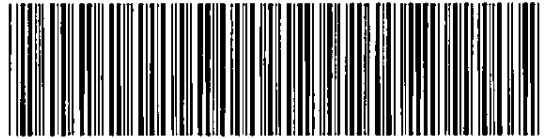
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 DEC 27 AM 4:56

CLERK OF DISTRICT COURT
ALABAMA

T.J.H.
11/26/24

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: GJA SOLUTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

8640 SW 108 STREET

SAME

MIAMI, FL. 33156

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: GABRIEL ANGULO (P)

Name and Title: _____

Address 8640 SW 108 STREET

Address: _____

MIAMI, FL. 33156

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: GABRIEL ANGULO
Address: 8640 SW 108 STREET
MIAMI, FL. 33156

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: GABRIEL ANGULO
Address: 8640 SW 108 STREET
MIAMI, FL. 33156

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (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

x 
Required Signature/Registered Agent

x 12/14/23
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.

x 
Required Signature/Incorporator

x 12/14/23
Date

FILED
2023 DEC 27 AM 4:06
SECRETARY OF STATE
TALLAHASSEE, FL

GJA Solutions Inc

P24000006294

8640 SW 108 Street
Miami, FL 33156

December 1st, 2023

REF: GJA Solutions Inc.
Document Number: P1900055314

To Whom It May Concern:

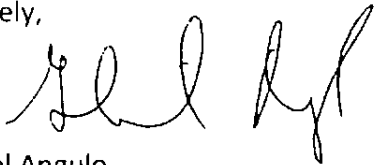
My name is Gabriel Angulo, I am the President of GJA Solutions Inc.

I am not planning to reinstate the company referenced above and wish to release the name.

Please open the company again using the same name.

Thank you in advance.

Sincerely,



Gabriel Angulo
President

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SECRETARY OF STATE
TALLAHASSEE, FL

2023 DEC 27 AM 4:56

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