

7/8/24, 12:51 PM

Division of Corporations

Florida Department of State
Division of Corporations
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H240002313513ABCV

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

From:
Account Name : HADAS ACCOUNTING AND TAX SERVICES
Account Number : I20170000018
Phone : (305)222-2289
Fax Number : (305)221-3810

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

Email Address: hadas taxeservices@gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION
JF MOVING SERVICES CORP

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

RECEIVED
2024 JUL -8 PM 2:02
DIVISION OF CORPORATIONS
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HADAS SERVICES

T-JH
7/9/24

COVER LETTER

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

SUBJECT: JF MOVING SERVICES CORP

(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: Blanca L Lacayo

Name (Printed or typed)

210 SW 107th AVE,

Address

MIAMI FL 33174

City, State & Zip

305-222-2289

Daytime Telephone number

hadastaxeservices@gmail.com

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

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

FILED
2024 JUL -9 PM 2:50
STATE

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: JF MOVING SERVICES CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

14243 SW 155TH TERRACE MIAMI FL 33177

Mailing address, if different is:

SAME

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: Jerico Flores (President)

Name and Title: _____

Address 14243 SW 155TH TERRACE MIAMI FL 33177

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
2024 JUL -9 PM 2:53
CLERK OF DISTRICT COURT
STATE OF FLORIDA

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: Blanca L Lacayo

Address: 210 SW 107th AVE, MIAMI FL 33174

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Jerico Flores

Address: 14243 SW 155TH TERRACE

MIAMI FL 33177

ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: 07/08/2024 (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*

Blanca L Lacayo 07/08/2024

Required Signature/Registered Agent 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.

[Signature] 07/08/2024

Required Signature/Incorporator Date

FILED

2024 JUL -9 PM 2:57

STATE