

COVER LETTER

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

SUBJECT: JCV HOME INSPECTION 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: Hadas Accounting & Tax Services Inc
Name (Printed or typed)

210 SW 107th AVE
Address

Miami, FL 33174
City, State & Zip

305-222-2289
Daytime Telephone number

hadastaxerservices@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
DEPT. OF STATE
24 DEC 30 PM 3:58

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:

JCV HOME INSPECTION INC**ARTICLE II PRINCIPAL OFFICE**Principal street address10750 NW 86 ST Suite 210Miami, FL 33174

Mailing address, if different is:

10750 NW 66 ST Suite 210, MiamiFL 33178**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Home Inspection**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: JUAN C VELASQUEZ (P)10750 NW 66 ST Suite 210

Address

Miami, FL 33178

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

24 DEC 30 PM 3:58

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SECRETARY OF STATE
601 DECATUR ST
NORFOLK, VA 23510

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: Hadas Accounting & Tax Services IncAddress: 210 SW 107th Ave
Miami, FL 33174**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: JUAN C VELASQUEZAddress: 10750 NW 66 ST Suite 210
Miami, FL 33178**ARTICLE VIII EFFECTIVE DATE:**Effective date, if other than the date of filing: January 01, 2025 (OPTIONAL)

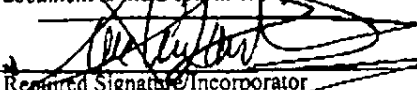
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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*

Required Signature/Registered Agent

January 01, 2025

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 §817.155, F.S.

Required Signature/Incorporator

January 01, 2025

Date

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24 DEC 30 PM 3:58
CORPORATIONS