P1000053629

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

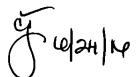
Office Use Only



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COVER LETTER

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

SUBJECT: SM &	PJ CORPORATION		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation an	d 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 CO	.
Jul FROM:	io Cesar Rubiano		
(KOM	Nam	e (Printed or typed)	
141	14 Fox Glove Street		
		Address	元
Win	nter Garden, FL 34787		\(\frac{1}{2}\) \(\frac{1}2\) \(\frac{1}{2}\) \(\frac{1}2\) \(\frac{1}2\) \(\frac{1}2\) \(\frac{1}2\) \(\frac
	City.	State & Zip	
407	435 0536		
 -	Daytime 1	Celephone number	
rubi	iano@une.net.co		22

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

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

ARTICLES OF INCORPORATION

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

FILED

ARTICLE I NAME The name of the corpora	tion shall be: SM & PJ CO	RPORATION		16 JUN 17	PH 3- 02
ARTICLE II PRING	CIPAL OFFICE Principal street address		Mailing addre	SECOLO I A Consess, if different is:	CSPATE FLORED
Winter Garden, FL 347					
ARTICLE III PURP	OSE the corporation is organized is:	Any lawful purpose i	For which companies n	nay be organized.	
		-			
	ES Stock is:				
Name and Titl	e:	ent Name	and Title:		<u></u>
Address	Winter Garden, FL 34787	Addre	ss:		
Name and Title	Piedad Tovar de Rubiano - Se	cretary Name	and Title:		
Address	Winter Garden, FL 34787	Addre	ss;		 _
	winter Garden, PD 34787				
Name and Title	:	Name	and Title:		_
Address		Addre			
			_ 		

Name an	nd Title:	Name and Title:
Address	i.	Address:
	<i>REGISTERED AGENT</i> Jorida street address (P.O. Box NOT acc	ceptable) of the registered agent is:
Name:	Julio Cesar Rubiano	
Address:	14114 Fox Glove Street	
	Winter Garden, FL 34787	
<u>ARTICLE VII</u>	INCORPORATOR	
The <u>name and a</u>	ddress of the Incorporator is:	
Name:	Julio Cesar Rubiano	
Address:	14114 Fox Glove Street	02
	Winter Garden, FL 34787	,
Effective date, if	EFFECTIVE DATE: Other than the date of filing: Interest is listed, the date must be specific along.	. (OPTIONAL) and cannot be more than five business days prior or 90 bus
Note: If the date		applicable statutory filing requirements, this date will not be list records.
this certificate, I	am familiar with and accept the appoints	of process for the above stated corporation at the place designent as registered agent and agree to act in this capacity
Elflue	≥. 	June 10, 2016
Cesar Ru	Required Signature/Registered	Agent Date
I submit this doc	ument and affirm that the facts stated h	erein are true. I am aware that the false information submi egree felony as provided for in s.817.155, F.S.
ulipur.	>	June 10, 2016