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

From: Account Name : M. BURR KEIM COMPANY
Account Number : 119990000242
Phone : (215)563-8113
Fax Number : (215)977-9386

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
AGJR 16 Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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2019 FEB 15 PM 3:29
SECRETARY OF STATE
TALLAHASSEE FL

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: AGJR16 Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
8401 SOUTHBRIDGE DR., APT. 2
ESTERO, FL 33967

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in marketing & consulting services

ARTICLE IV SHARES

200 SHARES, NO PAR VALUE
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Justin Roethlingshoefer, Pres. & Secy. Name and Title:
Address: 8401 Southbridge Dr., Apt. 2 Address:
Estero, FL 33967

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: JUSTIN ROETHLINGSHOEFER

Address: 8401 SOUTHBRIDGE DR., APT. 2
ESTERO, FL 33967

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JUSTIN ROETHLINGSHOEFER

Address: 8401 SOUTHBRIDGE DR., APT. 2
ESTERO, FL 33967

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  _____ Feb 14/19
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.

X  _____ Feb 14/19
Required Signature/Incorporator Date