

12/9/2020

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From: Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-0821
Fax Number : (850)558-1515

****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 LIMITED LIABILITY CO.
LIGHTHOUSE JIB CORP.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

20 DEC -9 PM 1:49

2020 DEC -9 PM 3:30

Derrick Thompson
12/10/2020

COVER LETTER

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

SUBJECT: LIGHTHOUSE JIB 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED:	

2021-9-14

FROM: MARIA GUARDUCCI, PARALEGAL
Name (Printed or typed)

325 COLUMBIA TPKE, STE 110
Address

FLORHAM PARK, NJ 07932
City, State & Zip

973-535-1900
Daytime Telephone number

donna@mannisgroup.com
E-mail address: (to be used for future annual report notification)

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

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: LIGHTHOUSE JIB CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address: c/o Mannis Group, 145 Soundings Avenue, Suite 210, Jupiter, FL 33477. Mailing address, if different is:

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

Jeffrey Citron, President & Treasurer; Suzanne Citron, Secretary & VP. Both at c/o Mannis Group, 145 Soundings Avenue, Suite 210, Jupiter, FL 33477.

Name and Title: Address: (Blank lines for additional officers)

Name and Title: Address: (Blank lines for additional officers)

2020-12-09 17:11

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: Donna Wohlfarth
 Address: 145 Soundings Avenue, Ste 210
Jupiter, FL 33477

2020-12-09
 10:11 AM
 [Stamp]

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Kevin M. Kilcullen, Esq.
 Address: 325 Columbia Turnpike, Ste 110
Florham Park, New Jersey 07932

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

Donna Wohlfarth
 Required Signature/Registered Agent

12/8/20
 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.

Kevin M. Kilcullen
 Required Signature/Incorporator

12/08/20
 Date