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COVER LETTER

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

SUBJECT: SJBT ENTERPRISES, 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
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: ESTEBAN MUNNE

Name (Printed or typed)

7980 NW 156 TERRACE

Address

MIAMI LAKES, FLORIDA 33016

City, State & Zip

305-725-4674

Daytime Telephone number

JMAYA109@AOL.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: SJBT ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7980 NW 156 TERRACE

SAME

MIAMI LAKES, FLORIDA 33016

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Professional Corporation

ARTICLE IV SHARES

The number of shares of stock is: (one)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ESTEBAN MUNNE, PVP

Name and Title: _____

Address 7980 NW 156 TERRACE

Address: _____

MIAMI LAKES, FLORIDA 33016

Name and Title: JENNY MAYA-MUNNE, D

Name and Title: _____

Address 7980 NW 156 TERRACE

Address: _____

MIAMI LAKES, FLORIDA 33016

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: ESTEBAN MUNNE
Address: 7980 NW 156 TERRACE
MIAMI LAKES, FLORIDA 33016

15 MAY -5 PM 4:20
DEPT. OF STATE
CORPORATION DIVISION

ARTICLE VII INCORPORATOR

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

Name: ESTEBAN MUNNE
Address: 7980 NW 156 TERRACE
MIAMI LAKES, FLORIDA 33016

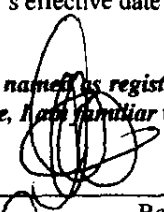
ARTICLE VIII EFFECTIVE DATE:

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 business days prior or 90 business 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  _____ 4/29/2015
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.

K  _____ 4/29/2015
Required Signature/Incorporator Date