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## COVER LETTER

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

SUBJECT: JNBC 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      ☐ \$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: Joseph R. Schlupman  
Name (Printed or typed)

5800 SW 105th St.  
Address

Miami FL 33156  
City, State & Zip

305-987 4478  
Daytime Telephone number

JSchlupman@hotmail.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: JNBC Enterprises, Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

5800 SW 105th St

Miami FL 33156

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Window Genie Franchise.

Specializing in window cleaning, tinting & pressure washing.  
Additionally gutter cleaning, Awning cleaning &  
Roof cleaning.

**ARTICLE IV SHARES**

The number of shares of stock is: 10,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Joseph Schlimm Name and Title: \_\_\_\_\_

Address: (President, Secretary, Treasurer) Address: \_\_\_\_\_

5800 SW 105th St

Miami FL 33156

Name and Title: Natalia FROUJERDO Name and Title: \_\_\_\_\_

Address: (Vice President) Address: \_\_\_\_\_

5800 SW 105th St.

Miami FL 33156

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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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: Joseph R. Schlipman  
Address: 5800 SW 105th St  
Miami FL 33156

**ARTICLE VII INCORPORATOR**

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

Name: Joseph R. Schlipman  
Address: 5800 SW 105th St  
Miami FL 33156

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TALLAHASSEE, FLORIDA  
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**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: May 1 2016. (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*

  
Required Signature/Registered Agent

5/1/2016  
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.*

  
Required Signature/Incorporator

5/1/2016  
Date