

Pb3000011566

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

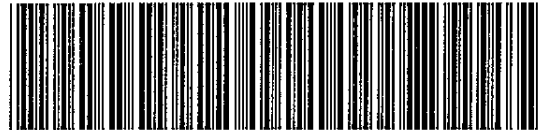
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FL 32301

TRANSMITTAL LETTER

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

SUBJECT: JoJo's Sub Shop, 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: JONATHAN ARGUELLO
Name (Printed or typed)

4862 SW 147CT
Address

MIAMI, FL 33185
City, State & Zip

786-255-6534
Daytime Telephone number

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:

Jodo's SUB SHOP INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4862 SW 147 CT
MIAMI, FL 33185

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RETAIL SUBS FOR TAKE-OUT.

ARTICLE IV SHARES

The number of shares of stock is:

10 SHARES

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

JONATHAN AREUELLO 4862 SW 147 CT MIAMI, FL 33185 (PRESIDENT)
ALFONSO DE LA ROSA 15470 SW 82 LN. #321 MIAMI, FL 33193 (V.P.)
GLORIA E. BRISENO 4862 SW 147 CT MIAMI, FL 33185 (SECRETARY)

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

JONATHAN AREUELLO
4862 SW 147 CT
MIAMI, FL 33185

ARTICLE VII INCORPORATOR

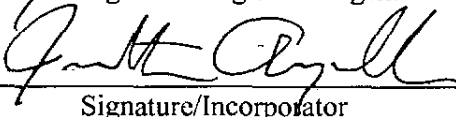
The name and address of the Incorporator is:

JONATHAN AREUELLO 4862 SW 147 CT MIAMI, FL 33185
ALFONSO DE LA ROSA 15470 SW 82 LN. #321 MIAMI, FL 33193
GLORIA E. BRISE 4862 SW 147 CT MIAMI, FL 33185

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


Signature/Registered Agent

01-17-03
Date


Signature/Incorporator

01-17-03
Date

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03 JAN 23 PM 3:42
SECRETARY OF STATE
TALLAHASSEE FLORIDA