

P030000063652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300019174233

06/04/03--01069--011 **87.50

FILED
03 JUN -4 AM 7:54
STATE
TALLAHASSEE, FLORIDA

JCA ENTERTAINMENT

JUST CLOWNING AROUND ENTERTAINMENT

340 NW 54 STREET

FORT LAUDERDALE, FL. 33309

(954) 351-0072 * (954) 748-0102

FAX: (954) 351-9126 * www.JCAEntertainment.com

June 2, 2003

To Whom It May Concern:

I am resubmitting my application with my check. On Friday I mailed out the envelope forgetting to include the check.

I apologize for any inconvenience. If you have any questions please feel free to contact me.

Eventfully yours,

Cheryl Feinberg
Corporate Event Producer
www.JCAEntertainment.com

JCA Entertainment highly recommends:
www.sleepybearcabin.com

TRANSMITTAL LETTER

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

SUBJECT: A JCA Event, 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: Cheryl Feinberg

Name (Printed or typed)

340 NW 54 Street

Address

Fort Lauderdale, Fl. 33309

City, State & Zip

(954) 351-0072

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)

FILED

ARTICLE I NAME

The name of the corporation shall be:

A JCA Event, Inc.

03 JUN -4 AM 7:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

340 NW 54 Street
Fort Lauderdale, Fl. 33309

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any business as permitted under the laws of the United States and of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

10,000 shares of common stock, \$1.00 par value per share.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Cheryl Feinberg - 340 NW 54 Street, Fort Lauderdale, Fl. 33309

Maggie Speckmann - 13905 Collectiong Canal Road, Loxahatchee, Fl. 33470

ARTICLE VI REGISTERED AGENT

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

Cheryl Feinberg
340 NW 54 Street
Fort Lauderdale, Fl. 33309

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Cheryl Feinberg
340 NW 54 Street
Fort Lauderdale, Fl. 33309

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

Cheryl Feinberg
Signature/Registered Agent

6/2/03
Date

Cheryl Feinberg
Signature/Incorporator

6/2/03
Date