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TRANSMITTAL LETTER

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

SUBJECT:	CJA I	NC ASSOCIA			
	(PROPOSED CORPORATE I	NAME – MUST INCLUDE	SUFFIX)		
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:					
□ \$70.00	∑ \$78.75	□ \$78.75	□ \$87.50		
Filing Fee	Filing Fee	Filing Fee	Filing Fee,		
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of		
			Status		
		ADDITIONAL CO	PY REQUIRED		
	•				
FROM:					
CARMIL LOBATO Name (Printed or typed)					
Name (Printed or typed)					
9743 ARBOR MEADOW ORIVE					
Address					
BOUNTAL BRAFF FROM 33457					
BOYMON BEACH FLORIDA 33437 City, State & Zip					
	EC 1 00 C	mee			
S6 -735 - 0788 Daytime Telephone number					

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



July 17, 2003

CARMEL LOBATO 9743 ARBOR MEADOW DRIVE BOYNTON BEACH, FL 33437

SUBJECT: CJA INC.

Ref. Number: W03000020329

We have received your document for CJA INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Document Specialist New Filings Section

Letter Number: 203A00042000

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: CJA EAC. ASSOCIATES INC	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 9743 AR BOR MEADOW DRIVE BOYNTON BEACH, FLORIOR 33437	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: HAIR SALON	
ARTICLE IV SHARES The number of shares of stock is: /O	SECRETARY TALLAHASSE
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): CARMEL LOBATO ARESIDENT 9743 ARBOR MEADON ORIVE BOYNTON BENCH, FURIOR 33437	7 AH 9: 56 CUF STATE EF. FLORIDA
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: CARMEL LOBATO 9743 ARBOR MEADON DRIVE BOLNTON BEACH, FLORIDA 33437	
The name and address of the Incorporator is: CARMEL LOBATO 9743 ARBOR MEADOW DRIVE BOYMON BEACH, FCORIOD 33437	
**************************************	******************** e designated in thi
Signature/Registered Agent Date	