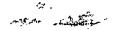
## P0700111070

(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
SECRETARY OF STATE

RS 10/9/07



## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 28, 2007

JULIO W. HOLNESS 21 SPRING MEADOWS DRIVE ORMOND BEACH, FL 32174

SUBJECT: JUBETCO ENTERPRISE, INC. Ref. Number: W07000048133

We have received your document for JUBETCO ENTERPRISE, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return the corrected 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) 245-6870.

Karen Saly Document Specialist New Filing Section

Letter Number: 507A00057001

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negling address of the error. A post of an the ising secondario for the copy of this large, with a copy of this large, with a copy of this large, within the corrected and one copy of your document, and hease teluin the corrected and and one copy of your account the area copy of this later, within the copy of this later.

## **COVER LETTER**

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

SUBJECT:	JUBETCO E.	NTERPRISE	E, INC.
	(PROPOSED CORPORA	TE NAME MUST INCL	<u>UDE SUFFIX</u> )
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	l 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
		1	Status
		ADDITIONAL CO	PPY REQUIRED
FROM:	Julio W. Name	Holwess (Printed or typed)	
	(21 Spling MEADOWS		
	ORMOND BY	EACH, FL State & Zip	32/74
	(386) 676 · Daytime T	elephone number	<del></del>

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	FILED
The name of the corporation shall be:	
	07 OCT -8 PM 3:51
JUBETEO ENTERPRISE, INC.	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE	ALL AMASSEE, FLORIDA
The principal place of business/mailing address is:	
21 Spring MEADONS Da.	
ORMOND BEACH, EL 32120	
The purpose for which the	
The purpose for which the corporation is organized is:	
FOR PROFIT	
ARTICLE IV SHARES	
The number of shares of stock is:	
ONE HUNDRED (100)	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	
Julio W. HolNESS	
	•
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Boy NOT acceptable) of the	e registered agent is:
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the	
The name and Florida street address (P.O. Box NOT acceptable) of the	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the	
The name and Florida street address (P.O. Box NOT acceptable) of the Julio W. Holvess 21 Spring MEADOWS DUVE, ORMON.  ARTICLE VII INCORPORATOR  The name and Florida street address (P.O. Box NOT acceptable) of the ARTICLE VII INCORPORATOR	DBEACH, FC 321
The name and Florida street address (P.O. Box NOT acceptable) of the Julio W. Holvess 21 Spring MEADOWS DUVE, ORMON.  ARTICLE VII INCORPORATOR  The name and Florida street address (P.O. Box NOT acceptable) of the ARTICLE VII INCORPORATOR	DBEACH, FC 321
The name and Florida street address (P.O. Box NOT acceptable) of the Julio W. Holvess 21 Spring MEADOWS DUVE, ORMON.  ARTICLE VII INCORPORATOR  The name and Florida street address (P.O. Box NOT acceptable) of the ARTICLE VII INCORPORATOR	DBEACH, FC 321
The name and Florida street address (P.O. Box NOT acceptable) of the Julio W. Holness 21 Spring MEADOWS DUVE, ORMON.  ARTICLE VII INCORPORATOR  The research of the learness to six	DBEACH, FC 321
The name and Florida street address (P.O. Box NOT acceptable) of the Julio W. Holness 21 Spring Meadows Drive, Ormon.  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Julio W. Holness  ZI Spring MEADOWS Drive, Ormon.  Having been named as registered agent to accept service of process for the above st	D BEACH, K 32/7  D BEACH, H 32/7  ***********************************
The name and Florida street address (P.O. Box NOT acceptable) of the Julio W. Holness 21 Spring MEADONS DRIVE, ORMON.  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Julio W. Holness  ZI Spring MEADONS DRIVE, ORMON.  ZI Spring MEADONS DRIVE, ORMON.	D BEACH, K 32/7  D BEACH, H 32/7  ***********************************
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The name and Florida street address (P.O. Box NOT acceptable) of the Julio W. Holness Dulve, Ormon.  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Julio W. Holness  ZI Spring MEADONS Dulve, Ormon.  Having been named as registered agent to accept service of process for the above st certificate, I am familiar with and accept the appointment as registered agent and agriculture.	DBEACH, FC 32/7  DBEACH, FC 32/7  ***********************************