# PU800037634

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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SECRETARY OF STATE
TAIL AHASSEE, FLORID

# **COVER LETTER**

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

SUBJECT:	Japlop Enterprises, Inc	•	
Enclosed are an o	(PROPOSED CORPORA)		
\$70.00 Filing Fee	\$78.75	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status
FROM: _	Lilian Pembe	rton (Printed or typed)	
	5509 NW 107	Ave	
	Coral Springs	s, FL 33076	
	954-344-3760	· )	
	Daytime To	elephone 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:

Japlop Enterprises, Inc.

2008 APR | | PM 3: 3|
SECRETARY OF STATE
TALLAHASSEE, FLORIO

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5509 NW 107 Ave Coral Springs, FL 33076

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business

### ARTICLE IV SHARES

The number of shares of stock is:

100 shares common stock each share having a par value of \$1.00

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Lilian Pemberton

Director

5509 NW 107 Ave

Coral Springs, FL 33076

### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Lilian Pemberton 5509 NW 107 Ave Coral Springs, FL 33076

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lilian Pemberton

5509 NW 107 Ave

Coral Springs, FL 33076

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

Signature/Incorporator

Date

Doto