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## Certificates of Status

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10 APR -8 AM 11:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EP 4/9/18

## COVER LETTER

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

SUBJECT: Geena's Weener's, 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: Michael P. Jacobson

Name (Printed or typed)

701 NW 19<sup>th</sup> Street, #212

Address

FT. Lauderdale, FL 33311

City, State & Zip

954-462-1999

Daytime Telephone number

queengee317@aol.com

E-mail address: (to be used for future annual report notification)

**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:

Geena's Weena's, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

701 NW 19th St. #212  
Ft. Lauderdale, FL 33311

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Food Vending cart

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Michael P. Jacobson Pres.  
701 N.W. 19th St. #212  
Ft. Lauderdale, FL 33311

**ARTICLE VI REGISTERED AGENT**

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

Michael P. Jacobson  
701 NW 19th St. #212  
Ft. Lauderdale, FL 33311

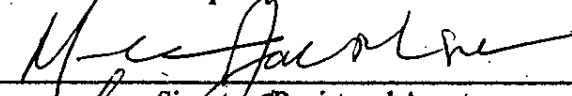
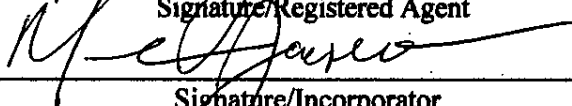
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Michael P. Jacobson  
701 NW 19th St. #212  
Ft. Lauderdale, FL 33311

\*\*\*\*\*

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

4/5/10  
\_\_\_\_\_  
Date  
4/5/10  
\_\_\_\_\_  
Date

FILED  
10 APR - 8 AM 11:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA