

P10000071546

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

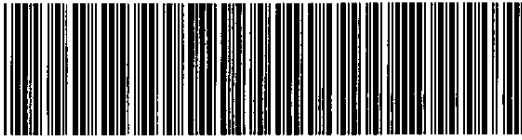
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2010 AUG 27 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01-15-8
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COVER LETTER

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

SUBJECT: DONA JUANITA 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: BLAS GARCIA

Name (Printed or typed)

PO BOX 881532

Address

PORT SAINT LUCIE, FL 34988 ..

City, State & Zip

772-940-6770

Daytime Telephone number

GBLAS32@YAHOO.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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

DONA JUANITA INC.

ARTICLE II PRINCIPAL OFFICE

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

PO BOX 881532 - 437 NE Main Sail St., Port St. Lucie, Fl. 34983
PORT SAINT LUCIE, FL 34988

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PURPOSE OF THIS CORPORATION IS WHOLESALE DISTRIBUTION

ARTICLE IV SHARES

The number of shares of stock is:

1000 COMMON STOCK

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

BLAS GARCIA
PO BOX 881532
PORT SAINT
LUCIE, FL 34988

ARTICLE VI REGISTERED AGENT

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

BLAS GARCIA
437 NE MAIN SAIL STREET
PORT SAINT LUCIE, FL 34983

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

BLAS GARCIA
PO BOX 881532
PORT SAINT LUCIE, FL 34988

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

BLAS GARCIA
Signature/Registered Agent
BLAS GARCIA
Signature/Incorporator

08/11/2010
Date
8/11/2010
Date