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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
12/1

COVER LETTER

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

SUBJECT: J & S BARTENDING, 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 BRAVERMAN, ESQ.**

Name (Printed or typed)

2650 WEST STATE ROAD 84, SUITE 103

Address

FT. LAUDERDALE, FL 33312

City, State & Zip

954 791 2010

Daytime Telephone number

mike@mbravermanpa.comcastbiz.net

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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TALLAHASSEE FLORIDA

ARTICLE I NAME J & S BARTENDING, INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
2650 WEST STATE RD 84, STE 101A
FT. LAUDERDALE, FLORIDA 33312

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
TO PROVIDE HOSTESS AND BARTENDING SERVICES FOR PRIVATE BANQUETS AND
SOCIAL GATHERINGS AND ALL MATTERS WITHIN THE LAWS OF THE STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is: 100 NO PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JENNIFER McGLINCHEY, PRES./SEC./TREAS.	Name and Title: _____
Address: 2650 WEST STATE ROAD 84	Address: _____
SUITE 101A	_____
FT. LAUDERDALE, FL 33312	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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


Name: JENNIFER McGLINCHEY
Address: 2650 WEST STATE ROAD 84, SUITE 101A
FT. LAUDERDALE, FL 33312

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Name: JENNIFER McGLINCHEY
Address: 2650 WEST STATE ROAD 84, SUITE 101A
FT. LAUDERDALE, FLORIDA 33312

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

 _____ Required Signature/Registered Agent	11/24/10 _____ Date
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I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

 _____ Required Signature/Incorporator	11/24/10 _____ Date
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