

P11000051972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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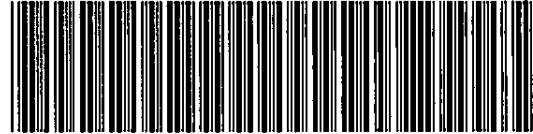
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900208192409

05/31/11--01008--017 **78.75

FILED

11 MAY 31 AM 10:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 06/02/11

COVER LETTER

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

SUBJECT: NNS, 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: Natalie Jourdan

Name (Printed or typed)

300 Sheoah Blvd, 404

Address

Winter Springs, FL 32708

City, State & Zip

407-376-4970

Daytime Telephone number

NNSInc@ymail.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 NNS Inc
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
300 Sheoah Blvd, 404
Winter Springs, FL 32708

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Window Tinting

ARTICLE IV SHARES
The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Natalie Jourdan, Owner/President
Address: 300 Sheoah Blvd, 404
Winter Springs, FL 32708

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Natalie Jourdan
Address: 300 Sheoah Blvd, 404
Winter Springs, FL 32708

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Natalie Jourdan
Address: 300 Sheoah Blvd, 404
Winter Springs, FL 32708

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

Natalie Jourdan
Required Signature/Registered Agent

5/26/11
Date

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.

Natalie Jourdan
Required Signature/Incorporator

5/26/11
Date

FILED
11 MAY 31 AM 10:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P11000052151

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

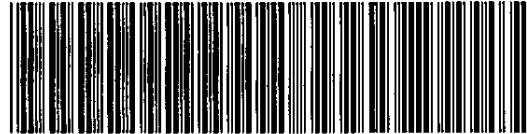
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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06/01/11--01009--013 **87.50

FILED
11 JUN -1 PM 4:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 06/02/11

COVER LETTER

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

SUBJECT: JWACE, 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: Donald H. Eller
Name (Printed or typed)

209 Worth Avenue
Address

Palm Beach, Florida 33480
City, State & Zip

561-835-9139
Daytime Telephone number

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: JWACE, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
209 Worth Avenue
Palm Beach, Florida 33480

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
retail sales of jewelry, watches and Coins

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Donald H. Eller, President
Address: 209 Worth Avenue
Palm Beach, Florida 33480

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

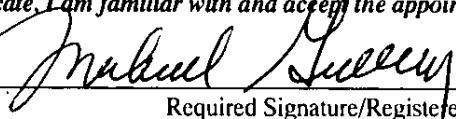
Name: Michael Goldberg, PA
Address: 16855 N.E. 2nd Avenue
North Miami, FL 33162

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Donald H. Eller
Address: 209 Worth Avenue
Palm Beach, FL 33480

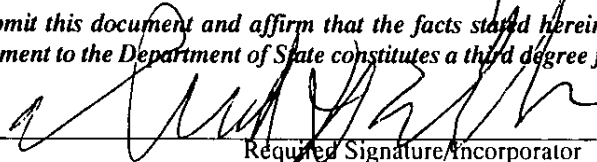
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

5/21/2011
Date

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

5/21/2011
Date

FILED
11 JUN - 1 PM 4:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA