## 4 711000011946

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

Office Use Only



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## **COVER LETTER**

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

SUBJECT: Jerk Joint (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 \$78.75 \$87.50 \$87.50 Filing Fee & Certificate of Status  & Certified Copy & Certified Copy & Certificate of Status  ADDITIONAL COPY REQUIRED	
4115 Cedar Creek Ranch Cit 5	Property of the same of the sa
City, State & Zip  954 649 1893  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 NA The name of the corpor		it co.,	·
	Principal office Principal street address 15 cedos Creek Road Ci	Mailing add	lress, if different is:
TO CON	RPOSE I the corporation is organized is: Cluct a food server state of Florida	sice busin	<del>(~</del> \$\$
ARTICLE IV SH The number of shares of	IARES of stock is: \$1.00 \ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	s, leach	
Name and Title: Address:	TTIAL OFFICERS AND/OR DIRECTORS CACITON WILLIAMS / OWNER 15 CEDAR CREEK ROCKL CIR OKE WORTH, FL 33467	Name and Title:Address:	
Name and Title: Address:		Name and Title:Address:	
Name and Title: Address:		Name and Title:Address:	1
ARTICLE VI RE	GISTERED AGENT	-	
The <u>name and Florida</u> Name: Address:	Street address (P.O. Box NOT acceptable) of CACITON WILLIAMS 4115 CEDAT CTECK RANGE LOKE WOOTH, FL 3346	cit	AUG 10
ARTICLE VII IN The name and addres Name: Address:	CORPORATOR  s of the Incorporator is:  (12 1 19 Williams  +115 (= 19 CTEK Range  Lake Welth FL	له	AM 9: 39
Having been named a this certificate, I am fa	is registered agent to accept service of process imiliar with and accept the appointment as regin	for the above stated corpor	ration at the place designated in this capacity
	Required Signature/Registered Agent		Date
I submit this document document to the Depart	nt and affirm that the facts stated herein are triment of State constitutes a third degree felony	true. I am aware that the f as provided for in s.817.155	alse information submitted in a 5, F.S.
- Contra	Required Signature/Incorporator	<del></del>	Date