

P11000105288

(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:

Office Use Only



400214890634

12/09/11--01024--007 \*\*78.75

SECRETARY OF STATE  
DIVISION OF CORPORATE  
2011 DEC -9 PM 3:32

12/12/11

## COVER LETTER

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

SUBJECT: JaneMae Jewels, 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: Karen J. Prevatt

Name (Printed or typed)

137 South Pebble Beach Blvd., Suite 102

Address

Sun City Center, Florida 33573

City, State & Zip

813 634-1750

Daytime Telephone number

janemaejewels@aol.com

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

**NOTE: Please provide the original and one copy of the articles.**

2011 DEC -9 PM 3:32

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME** JaneMae Jewels, Inc.  
The name of the corporation shall be:

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
5841 Sunset Falls Drive  
Apollo Beach, FL 33572

2011 DEC -9 PM 3: 32  
Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To conduct any and all business activities permitted by the laws of the State of Florida, including, but not limited to the manufacture and sale of jewelry, apparel, and decorative items.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

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

Name and Title: <u>Nancy E. Pettersen, D/P/S</u>	Name and Title: _____
Address: <u>5841 Sunset Falls Drive</u>	Address: _____
<u>Apollo Beach, FL 33572</u>	_____

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: Nancy E. Pettersen  
Address: 5841 Sunset Falls Drive  
Apollo Beach, FL 33572

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Karen J. Prevatt  
Address: 137 South Pebble beach Blvd., Suite 102  
Sun City Center, FL 33573

*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*

Nancy E. Pettersen  
\_\_\_\_\_  
Required Signature/Registered Agent  
NANCY E. PETTERSEN

12/6/2011  
\_\_\_\_\_  
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.*

Karen J. Prevatt  
\_\_\_\_\_  
Required Signature/Incorporator

12/6/2011  
\_\_\_\_\_  
Date

**KAREN J. PREVATT**