

P12000008032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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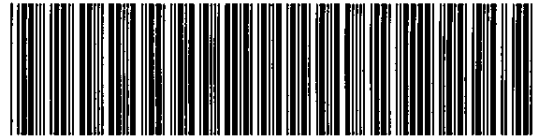
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 JAN 23 PM 2:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

df 1/24/12

COVER LETTER

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

SUBJECT: Jin Investments 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 Sullivan

Name (Printed or typed)

931 Village Boulevard, Suite 90581

Address

West Palm Beach, FL 33409-1939

City, State & Zip

(561) 972-8240

Daytime Telephone number

vinniegallo1@gmail.com

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

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

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TALLAHASSEE, FLORIDA

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:

Jin Investments Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
931 Village Boulevard, Suite 90581
West Palm Beach, FL 33409-1939

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful purposes.

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Michael Sullivan, President**
Address: **931 Village Boulevard Suite 90581
West Palm Beach, FL 33409**

Name and Title: _____
Address: _____

Name and Title: **Vincent Gallo, CEO**
Address: **931 Village Boulevard Suite 90581
West Palm Beach, FL 33409**

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 Sullivan**
Address: **931 Village Boulevard Suite 90581
West Palm Beach, FL 33409**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Vincent Gallo**
Address: **931 Village Boulevard Suite 90581
West Palm Beach, FL 33409**

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

01/18/2012
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

01-18-2012
Date

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA