P12000045097

| (Re | equestor's Name) | | | |
|---|-------------------|-------------|--|--|
| (Address) | | | | |
| (Ac | ldress) | | | |
| (Ci | ty/State/Zip/Phon | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only

W12-23964



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SEGRETARY OF STATE
FALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE ROPEDA Division of Corporations

May 1, 2012

MOLLY GUTCHER 1106 W. HORATIO STREET TAMPA, FL 33606

SUBJECT: J&L ENTERTAINMENT COMPANY

Ref. Number: W12000023964

We have received your document for J&L ENTERTAINMENT COMPANY and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L10000111045 (JL ENTERTAINMENT LLC).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 312A00013173

COVER LETTER

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

| SUBJECT: J&L Entertainment Cor | mpany |
|---|--|
| (PROPOSED CORPORA | TE NAME – <u>MUST INCLUDE SUFFIX</u>) |
| Enclosed are an original and one (1) copy of the arti | cles of incorporation and a check for: |
| \$70.00 \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED |
| | IBBITIONIE COLL REQUIRES |
| FROм: Molly Gutcher | |
| Name | (Printed or typed) |
| 1106 W. Horatio Street | Address |
| Tampa, Florida 33606 City, | State & Zip |
| 813-574-6491 Daytime T | elephone number |
| mollygutcher@yahoo.co | m d 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 The name of the co | NAME J&L Entertainment (propration shall be: | Gempany Jump Sp | ot Inc. |
|----------------------------------|--|-------------------------------------|-------------------------|
| : | PRINCIPAL OFFICE Principal street address 1106 W. Horatio Street Lampa, Florida 33606 | | dress, if different is: |
| Recreational | PURPOSE which the corporation is organized is: services, namely, operating indo np houses, batting cages, party ro | | - ' |
| ARTICLE IV | SHARES res of stock is:100 | | |
| | | | |
| | initial Officers AND/OR DIRECTION IN THE INITIAL OFFICERS AND INTERPRETARED A | Name and Title: Address: | |
| Name and T Address: | itle: | Address: | |
| Name and T Address: | itle: | Name and Title:Address: | |
| APTICI.E VI | REGISTERED AGENT | | 12 SE |
| The <u>name and Flo</u> Name: | orida street address (P.O. Box NOT acceptal Molly Gutcher | | E CALL |
| Address: | 1106 W. Horatio Street Tampa, Florida 33606 | | ASSE THE |
| | INCORPORATOR | | |
| | dress of the Incorporator is: | | 54 N FT |
| Name: Address: | Molly Gutcher 1106 W. Horatio Street Tampa, Florida 33606 | | ATE RIDA |
| • | ed as registered agent to accept service of p m familiar with and accept the appointment o | | |
| // | | | 4124112 |
| | Required Signature/Registered Agen | t | Date |
| | ment and affirm that the facts stated herei epartment of State constitutes a third degree | in are true. I am aware that the fo | |
| | | | 11121117 |
| | Required Signature/Incorporator | | |
| | required bighaldier incorporator | | Dary |