

P12000058894

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

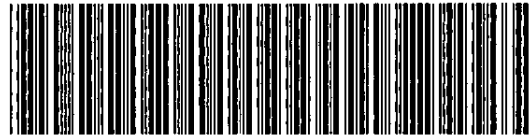
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12 JUL -2 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FL 32399

Bureau JUL -2 2012

COVER LETTER

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

SUBJECT: JilleryDesigns, 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: Jillian Tonge

Name (Printed or typed)

46 Clubhouse Dr. #103

Address

Palm Coast, FL 32137

City, State & Zip

813-493-0295

Daytime Telephone number

Jillerydesign@yahoo.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

Jillerydesigns, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

46 Clubhouse Dr. #103
Palm Coast, FL 32137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Retail and wholesale jewelry and supplies

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jillian Tonge/ President
Address: 46 Clubhouse Dr. #103
Palm Coast, FL 32137

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: Jillian Tonge
Address: 46 Clubhouse Dr. #103
Palm Coast, FL 32137

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jillian Tonge
Address: 46 Clubhouse Dr. #103
Palm Coast, FL 32137

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

Jillian Tonge
Required Signature/Registered Agent

6-25-12
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.

Jillian Tonge
Required Signature/Incorporator

6-25-12
Date

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