

P12000066354

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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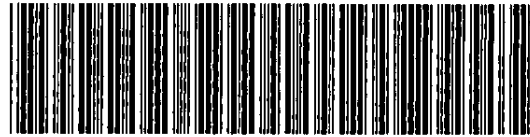
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 JUL 30 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L Burch JUL 31 2012

COVER LETTER

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

SUBJECT: JTJ Holdings, Corp.
(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: Judith P. Testa
Name (Printed or typed)

3422 Chessington Street
Address

Clermont, FL 34711
City, State & Zip

203-804-3702
Daytime Telephone number

jtjholdings@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

The name of the corporation shall be: JTJ Holdings, Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

3422 Chessington St.
Clermont, FL 34711

Mailing address, if different is:

56 Deer Run Rd
Wallingford, Ct 06492

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Financial Investments

ARTICLE IV SHARES

The number of shares of stock is: 1,000.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joseph Testa - President
Address: _____

3422 Chessington St.
Clermont FL 34711

Name and Title: _____
Address: _____

Name and Title: Judith P. Testa - Vice President
Address: _____

3422 Chessington St.
Clermont FL 34711

Name and Title: _____
Address: _____

Name and Title: Judith P. Testa - Secretary
Address: _____

3422 Chessington St.
Clermont, FL 34711

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: NRAI Services, Inc.
Address: 515 East Park Avenue
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Judith P. Testa
Address: 3422 Chessington St.
Clermont, FL 34711

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

NRAI Services, Inc.

Required Signature/Registered Agent

Wendy D Hea, Assistant Secretary

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

Date

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