

P120000083195

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

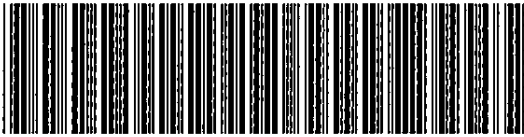
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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10/01/12--01033--002 \*\*78.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 OCT - 1 AM 10:48

Ps 10/2/12

## COVER LETTER

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

SUBJECT: JAKAZU 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: KESHA CAPERS

Name (Printed or typed)

2281 NW 135TH STREET #303

Address

MIAMI, FL 33167

City, State & Zip

786-389-4366

Daytime Telephone number

JAKAZUINC@COMCAST.NET

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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE I NAME**

JAKAZU INC.

The name of the corporation shall be:

12 OCT - 1 AM 10:48

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
2281 NW 135TH STREET #303  
MIAMI, FL 33167

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide virtual customer service and support.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,500

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

Name and Title:	KESHA CAPERS - PRINCIPAL OWNER	Name and Title:	
Address:	2281 NW 135TH STREET #303	Address:	
	MIAMI, FL 33167		

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:

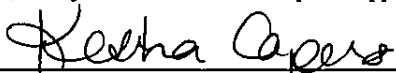
Name: KESHA CAPERS  
Address: 2281 NW 135TH STREET #303  
MIAMI, FL 33167

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: KESHA CAPERS  
Address: 2281 NW 135TH STREET #303  
MIAMI, FL 33167

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

9/27/12

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.



Required Signature/Incorporator

9/27/12

Date