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(Requestor's Name)				
(Address)				
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(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Dusiness Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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SECREDARY OF STATE PALLAHASSEE FLORIDA

J. S. Saule ... Saule ...



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 27, 2012

ARLENE RODRIGUEZ 8004 NW 154 ST #547 MIAMI LAKES, FL 33016

SUBJECT: JWILL PROPERTY, INC.

Ref. Number: W12000059064

We have received your document for JWILL PROPERTY, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please type or print the corporate name in article I.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Justin M Shivers Regulatory Specialist II

Letter Number: 012A00028160

COVER LETTER

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

SUBJECT: JW	ILL Property, I	nc.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation an	d a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: A	rlene Rodrigue	(Printed or typed)	
80	004 NW 154 S	treet, #547	
M	iami Lakes, FL		
30	City, 05-725-6222	State & Zip	
	Daytime T	elephone number	······································

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

MBgetaway@hotmail.com

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

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I	NAME TWILL Proper	LI TUC		
The name of the c	corporation shall be:	19, 110.		
ARTICLE II	PRINCIPAL OFFICE			
	Principal street address	Mailing add	dress, if different is:	
	8004 NW 154 Street, #547			
	Miami Lakes, FL 33016			
ARTICLE III	DIPPOSE	,		
The purpose for v	which the corporation is organized is:	-		
Conduct	which the corporation is organized is: Legal business in th J 1, 2013.	e State of Hork	da, effective	
Januari	J 1, 2019.			
ARTICLE IV The number of sha	SHARES ares of stock is:			
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT			
	itle: Arlene Rodriguez, President			
Address:	8004 NW 154 Street, #547 Miami Lakes, FL 33016	Address:		
	Miami Lakes, PL 33016			
Name and T	Title:	Name and Title:		
Address:		Address:		
Name and T	Title:	Name and Title:		
Address:		Address:		
		<u> </u>		
ARTICLE VI	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable) of the registered exect is:		
Name:	Arlene Rodriguez	of the registered agera is.	For 5	
Address:	8004 NW 154 Street, #547		58 %	
	Miami Lakes, FL 33016			
ARTICLE VII	INCORPORATOR		がっ は	
Name:	Idress of the Incorporator is: Ariene Rodriguez			
Address:	8004 NW 154 Street, #547		8	
Addiess.	Miami-Lakes, FL 33016	•	三型 5	
	7		STATE LORIDA	
Having been nan	ned as registered agent to accept service of proc	cess for the above stated corpor	ation at the place aesignatea in	
this ceftificate, I	am familiar with and accept the appointment as	registered agent and agree to a	ct in this capacity	
	11 1. 616 0		10/10/12	
, Jall	0 0 9 5		12/0/12	
	Required Signature/Registered Agent		Date	
	ument and affirm that the facts stated herein of Department of State constitutes a third degree fe			
wicument to the 1	repurament of state constitutes a third wegree fe	oony us provincu joi ut 5.01/.13	-11	
Gille	e & colles		12/6/12	
	Required Signature/Incorporator		Date	