

P12000102356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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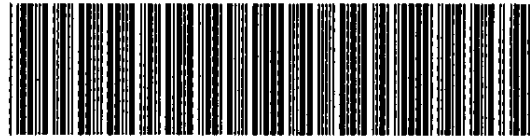
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 DEC 17 AM 10:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: JAI-ALAI APPAREL GOODS, 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: GLADYS A. AGUILERA

Name (Printed or typed)

441 VALENCIA AVE., #203

Address

CORAL GABLES, FL 33134

City, State & Zip

(305) 342-7732

Daytime Telephone number

gaaguilera4@gmail.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: **JAI-ALAI APPAREL GOODS, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address

441 VALENCIA AVE., #203
CORAL GABLES, FL 33134

Mailing address, if different is:

441 VALENCIA AVE., #203
CORAL GABLES, FL 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: THIS CORPORATION MAY ENGAGE IN THE TRANSACTION OF ANY OR ALL LAWFUL BUSINESS FOR WHICH CORPORATION MAY BE INCORPORATED UNDER THE FLORIDA GENERAL CORPORATION ACT OF THE STATE OF FLORIDA, AND THE DESIGN, MANUFACTURING, DISTRIBUTION AND SALE THROUGHOUT THE WORLD OF APPAREL GOODS.

ARTICLE IV SHARES

The number of shares of stock is: \$1,000 SHARE AT \$1.00 PAR VALUE.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: GLADYS A. AGUILERA, PRESIDENT & DIRECTOR
Address: 441 VALENCIA AVE., #203
CORAL GABLES, FL 33134

Name and Title: _____
Address: _____

Name and Title: GUIDO M. AGUILERA, SECRETARY & DIRECTOR
Address: 9321 SW 54 ST.
MIAMI, FL 33165

Name and Title: _____
Address: _____

Name and Title: CARLOS G. AGUILERA, TREASURER & DIRECTOR
Address: 6517 SW 116 PLACE #D
MIAMI, FL 33173

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: GLADYS A. AGUILERA
Address: 441 VALENCIA AVE., #203
CORAL GABLES, FL 33134


ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: GLADYS A. AGUILERA
Address: 441 VALENCIA AVE., #203
CORAL GABLES, FL 33134

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TALLAHASSEE, FLORIDA

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

12/13/12
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

12/13/12
Date