

P12000103659

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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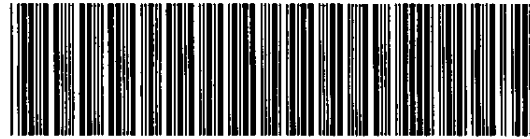
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch DEC 27 2012

COVER LETTER

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

SUBJECT: CJC Global Enterprises, 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: Carol J. Campbell
Name (Printed or typed)

1033 Westlawn Drive
Address

Jacksonville, FL 32211
City, State & Zip

~~702-217-5220~~ 904-725-1125
Daytime Telephone number

rconcommerce@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: **CJC Global Enterprises, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
1033 Westlawn Drive
Jacksonville, FL 32211

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the corporation is to conduct any lawful purpose or purposes.

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Carol J. Campbell, President**
Address: **1033 Westlawn Drive**
Jacksonville, FL 32211

Name and Title: **Daryl P. Campbell, Vice President**
Address: **9745 Touchton Rd., Unit 3332**
Jacksonville, FL 32211

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: **Carol J. Campbell**
Address: **1033 Westlawn Drive**
Jacksonville, FL 32211

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Carol J. Campbell**
Address: **1033 Westlawn Drive**
Jacksonville, FL 32211

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

Carol J Campbell *Carol J Campbell*

Required Signature/Registered Agent

12/18/2012

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.

Carol J Campbell *Carol J Campbell*

Required Signature/Incorporator

12/18/12

Date