## P13000040045

(Re	questor's Name)			
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
- <del>W13-23</del>	758			

Office Use Only



600246643976

04/22/13--01022--004 \*\*87.50

13 MAY -2 PM 1:58
SECRETARY OF STATE
APASSES STORING

WH

## **COVER LETTER**

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

SUBJECT:	J. Rosquites, (PROPOSED CORPORA)	Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	l 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: Juanita Rosquites  Name (Printed or typed)				
4001 E. Michigan St. Address				
Orlando, FL 32812 City, State & Zip				
(467) 520 -7203  Daytime Telephone number				
juanita rosquites a quail com E-mail address: (to be used for future annual report notification)				

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 23, 2013

JUANITA ROSQUITES 4001 E. MICHIGAN ST. ORLANDO, FL 32812

SUBJECT: J. ROSQUITES, INC. Ref. Number: W13000023758

We have received your document for J. ROSQUITES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 413A00009759

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

ARTICLE I NAM The name of the corporat	E ion shall be: J. Rosquites,	Inc.
ARTICLE II PRIM	VCIPAL OFFICE Principal street address	Mailing address, if AFFE TARY OF STATE
Orlando FI	<u>. 32812</u>	
	ne corporation is organized is: 1 am	be incorporated. This helps
with my futu	re work status.	
ARTICLE IV SHA The number of shares of s	stock is:1	
	<u>ial officers and/or director</u> court : Juanita Rosquit <del>es</del> Roport	S YName and Title:
	4001 E. Michigan St. Orlando, FL 32812	
Name and Title:		Name and Title:
Address		Address:
Name and Title		Name and Title:
Address		

(conti.)

FILED

Name and	Title:	Name and Title:	3 MAY -2 PM 1:59
Address		Address:	SECRETARY OF STATE SELAHASSEE FLORIDA
ARTICLE VI	REGISTERED AGENT rida street address (P.O. Box NOT acceptable) o	f the registered agent is:	
Name:	juanita Rosquiter	· · · · · ·	
Address:	4001 E. Michigan St.	-	
	orlando, FL 32812	-	
ARTICLE VII	INCORPORATOR		
The name and add	Iress of the Incorporator is:		
Name:	Juanita S. Rosquites 4001 E. Michigan St.	-	
Address:	4001 E. Michigan St.	<del>-</del>	
	Orlando, FL 32812	-	
	ed as registered agent to accept service of process m familiar with and accept the appointment as reg		
	Required Signature/Registered Agent		04/17/13
I submit this docu	Required Signature/Registered Agent  ment and affirm that the facts stated herein are  epartment of State constitutes a third degree felon	true. I am aware that the false	
	Required Signature/Incorporator		04)/17/13 Date