

P13000077482

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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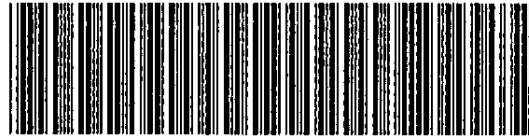
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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13 SEP 16 PM 4: 22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRB
9/19/13

COVER LETTER

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

SUBJECT: Jenkins 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: Andrew L. Jenkins
Name (Printed or typed)

1671 NW 97th Way
Address

Pembroke Pines, FL 33024
City, State & Zip

954-668-7789
Daytime Telephone number

Andrew.L.Jenkins@gmail.com
E-mail address: (to be used for future annual report notification)
Andrew.L.Jenkins@gmail.com

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: Jenkins Enterprises, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is: 18 SEP 16 PM 4: 22

1671 NW 97th Way
Pembroke Pines, FL 33024

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any lawful purpose.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Andrew L. Jenkins, Pres Name and Title: _____

Address: 1671 NW 97th Way Address: _____
Pembroke Pines, FL
33024

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(conti.)

Name and Title: _____

Name and Title: _____

FILED

Address _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: _____

Andrew L. Jenkins

Address: _____

1671 NW 97th Way
Pembroke Pines, FL 33024

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: _____

Andrew L. Jenkins

Address: _____

1671 NW 97th Way
Pembroke Pines, FL 33024

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

✓ Andrew L. Jenkins

Required Signature/Registered Agent

9/10/13

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.

✓ Andrew L. Jenkins

Required Signature/Incorporator

9/10/13

Date