P13000089369

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

Office Use Only



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10/30/13--01007--004 **70.00

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COVER LETTER

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

SUBJECT: PAN	NJO INCORPO	RATED	
~ 0 2 02011	(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	d 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 CO	PY REQUIRED
	561 NW 33 Ter	(Printed or typed)	
La	auderdale Lakes,		
95	54 612-3167	State & Zip	
Jo	Daytime Tordanp3@bellsouth.l	elephone number net d for future annual report	notification)
	\		 7

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

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

ARTICLE II PRII	TE tion shall be: PANNJO Incorpora NCIPAL OFFICE		
	Principal street address Mailing address, if different is		
3561 NW 33 T	er		
Lauderdale La	akes, FI 33309		
-			
ARTICLE III PUR The purpose for which the	POSE the corporation is organized is:	er service	
			13 OC SECRE
ARTICLE IV SHA The number of shares of	RES stock is: 100	s	T30 PH 2: 24 TARY OF STATE HASSEE FLORIDA
	Patricia Jordan, President		
Address	3561 NW 33 Ter	Address:	
. 144.1430	Lauderdale Lakes, FI 33309		
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	

Name and	Title:	Name and Title:	
Address		Address:	
ARTICLE VI	REGISTERED AGENT		
	orida street address (P.O. Box NOT acceptable) of	the registered agent is:	⊼s · ,,t
Name:	Patricia Jordan		ECR.
Address:	3561 NW 33 Ter		T 30
	Lauderdale Lakes, FI 33309		
ARTICLE VII	INCORPORATOR		PH 2: 24 OF STATE
The <u>name and ad</u>	<u>dress</u> of the Incorporator is:		
Name:	Patricia Jordan		
Address:	3561 NW 33 Ter		
	Lauderdale Lakes, FI 33309		
	ned as registered agent to accept service of process am familiar with and accept the appointment as regi		
	Hordan	1	0/28/13
	Required Signature/Registered Agent		Date
	ument and affirm that the facts stated herein are t Department of State constitutes a third degree felony		
	Horden		10/28/13
	Required Signature/Incorporator		Date