# PBOWGGAS

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# COVER LETTER\*

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

SUBJECT: JSHOWERER, IHC.				
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation an	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 COPY REQUIRED		
FROM:	Jose L	vis SEHVO	PERER	
	6650	e (Printed or typed)  NW 4/ 5  Address	treet	
	VIRGIN	Address 149 GANDE	ns, +1. 3316	
	786 Daytime T	-239-65 (Celephone number	6 <del>)</del>	
	TSHOWE			

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: JSHOWERER, INC.

ARTICLE II PRINCIPAL OFFICE

Principal Street Address:

6650 NW 41 STREET

VIRGINIA GARDENS, FL. 33166

Mailing Address if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND LAWFUL BUSINESS

**ARTICLE IV** 

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

JOSE LUIS SEHUOERER - P

Address:

6650 NW 41 STREET

VIRGINIA GARDENS, FL. 33166

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:

JOSE LUIS SEHUOERER

Address:

6650 NW 41 STREET

VIRGINIA GARDENS, FL. 33166

## ARTICLE VII INCORPORATOR

The name and address of the	e Incorporator is:				
Name:	JOSE LUIS SEHUOERER				
Address:	6650 NW 41 STREET				
	VIRGINIA GARDENS, FL. 33166				
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					
X L' 1 A L  Required Signature/Register		11/26/13 Date			
I submit this document and affirm that the facts stated herein are true. I am aware that the false information in a document to the Department of State constitutes a third degree felonas provided for in s.817.155, F.S.					
メエ! イAL  Required Signature/Incorpor	_	11/26/13 Date			