

P14000005792

(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:

Sheneka Geathers

AUTHORIZATION BY DOC #113

CORRECT # OF Shares to be 1

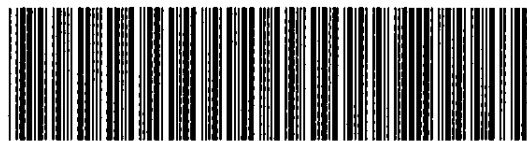
DATE 1/22/14 @ 2:27pm

DOC. EXAM

J. Bryan

Office Use Only

B w/400000/6 B
1/9/14



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01/06/14--01017--017 **78.75

FILED
14 JAN -6 PM 2:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

JAN 22 2014

J. BRYAN

COVER LETTER

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

FILED
14 JAN -6 PM 2:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: JIREH'S Mobile Kitchen, 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: Sheneka Geathers
Name (Printed or typed)
P.O. Box 6293
Address
Lake Worth FL 33466
City, State & Zip
(561) 889-6149
Daytime Telephone number
Fabulousnka3@Aol.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

January 9, 2014

SHENEKA GEATHERS
P.O. BOX 6293
LAKE WORTH, FL 33466

SUBJECT: JIREH'S MOBILE KITCHEN, INC.
Ref. Number: W14000001673

FILED
14 JAN -6 PM 2:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

We have received your document for JIREH'S MOBILE KITCHEN, INC. and your check(s) totaling \$78.75. 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.

If you have any further questions concerning your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 414A00000582

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: SIREH'S Mobile Kitchen, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

238 Jackson Ave
Greenacres, FL 33463

Mailing address, if different is:

P.O. Box 6293
Lake Worth, FL 33466

ARTICLE III PURPOSE

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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sheneka Geathers Name and Title: _____

Address _____ Address: _____

President

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

(cont.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Sheneka Gathers
Address: 238 Jackson Ave
Greenwood, FL 33463

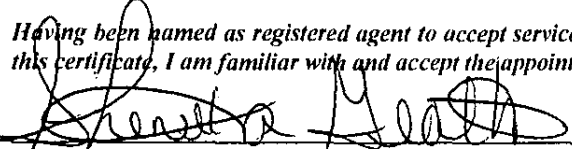
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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

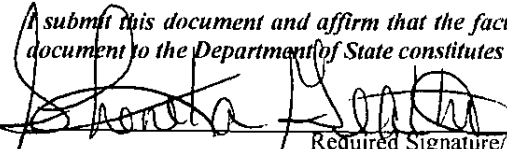
Name: Sheneka Gathers
Address: 238 Jackson Ave
Greenwood, FL 33463

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


Required Signature/Registered Agent

1-4-14
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.


Required Signature/Incorporator

1-4-14
Date