

P/KAW0332/L3

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

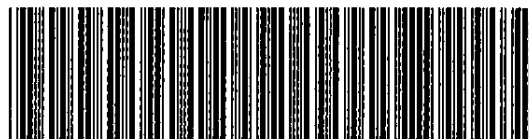
(Document Number)

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Special Instructions to Filing Officer:

Office Use Only

W14-11305



400256383924

02/19/14--01020--003 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 APR 11 AM 9:00

4/15/14

COVER LETTER

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

SUBJECT: **L & C PROPERTY 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: **LEUNISE JACKSON**

Name (Printed or typed)

1165 NW 140TH STREET

Address

MIAMI, FL 33168

City, State & Zip

(786) 426-8187

Daytime Telephone number

leunise1@yahoo.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

RECEIVED

14 APR 11 PM 7.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 20, 2014

LEUNISE JACKSON
1165 NW 140TH STREET
MIAMI, FL 33168

SUBJECT: L & C PROPERTY INC
Ref. Number: W14000011305

We have received your document for L & C PROPERTY 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Sylvia Gilbert
Regulatory Specialist II
New Filing Section

Letter Number: 314A00003884

COVER LETTER

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

SUBJECT: **JCB PROPERTY 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: **LEUNISE JACKSON**

Name (Printed or typed)

1165 NW 140TH STREET

Address

MIAMI, FL 33168

City, State & Zip

(786) 426-8187

Daytime Telephone number

leunise1@yahoo.com

E-mail address: (to be used for future annual report notification)

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: JCB PROPERTY INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1165 NW 140TH STREET

MIAMI, FL 33168

Mailing address, if different is: 1165 NW 140TH STREET

MIAMI, FL 33168

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: INVESTMENT PROPERTIES
BUY, RENT, AND SALE REAL ESTATE

ARTICLE IV SHARES

The number of shares of stock is: 2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LEUNISE JACKSON P
Address: 1165 NW 140TH STREET
MIAMI, FL 33168

Name and Title: CAPOUTE BEAUVAIS VP
Address: 1165 NW 140TH STREET
MIAMI, FL 33168

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

(conti.)

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: LEUNISE JACKSON

Address: 1165 NW 140TH STREET

MIAMI, FL 33168

ARTICLE VII INCORPORATOR

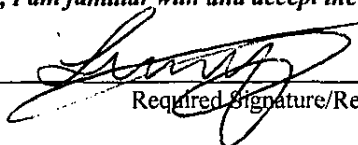
The name and address of the Incorporator is:

Name: LEUNISE JACKSON

Address: 1165 NW 140TH STREET

MIAMI, FL 33168

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

02/12/2014

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

02/12/2014

Date