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(Business Entity Name)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

SL
2/16/14

COVER LETTER

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

SUBJECT: JottleBooks 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: Aaron Korff

Name (Printed or typed)

6801 Lake Worth Road

Address

Greenacres, FL 33467

City, State & Zip

561-357-9029

Daytime Telephone number

akorff.vazkor@gmail.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: JottleBooks Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

6801 Lake Worth Road

Suite 106

Greenacres, FL 33467

Mailing address, if different is: 14 APR 14 4 9: 02

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To sell and maintain business software.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Aaron Korff (President) Name and Title: _____

Address: 6265 Indian Forest Circle Address: _____
Lake Worth, FL 33463

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: Aaron Korff
Address: 6265 Indian Forest Circle
Lake Worth, FL 33463

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Aaron Korff
Address: 6265 Indian Forest Circle
Lake Worth, 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

4/11/2014
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

4/11/2014
Date