

P1400 0046553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

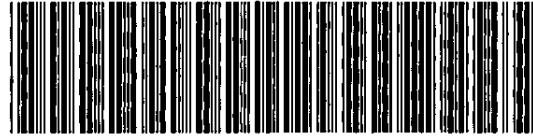
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400260044874

05/13/14--01005--008 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAY 28 PM 1:20

~~6244 000030524~~
6/10/14

COVER LETTER

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

SUBJECT: BYJANACO, 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: Jana Costa
Name (Printed or typed)

716 Lake Ave
Address

Lake Worth, FL 33460
City, State & Zip

561-249-7002
Daytime Telephone number

shoestringdesigns@janacosta.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

May 14, 2014

JANA COSTA
716 LAKE AVE
LAKE WORTH, FL 33460

SUBJECT: BYJANACO, INC.
Ref. Number: W14000030574

We have received your document for BYJANACO, 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 is illegible and not acceptable for imaging.

Section 607.0120(4), 617.01201, or 605.0206, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

Please return 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.

Carol Mustain
Regulatory Specialist II

Letter Number: 814A00010400

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: BY JANACO, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

716 Lake Ave
Lake Worth, FL
33460

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To operate retail store

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jana Costa Name and Title: _____

Address President Address: _____

716 Lake Ave
Lake Worth, FL 33460

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAY 28 PM 1:20

(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: Jana Costa
Address: 716 Lake Ave
Lake Worth, FL 33460

ARTICLE VII INCORPORATOR

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

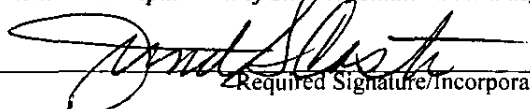
Name: Jana Costa
Address: 716 Lake Ave
Lake Worth, FL 33460

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

5-7-2014
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

5-7-2014
Date