P14000550520

(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:		
Opedia matruotiona to 1 ming Officer.		

Office Use Only



100261035221

1) W

06/11/14--01013--010 **78.75

14 JUN III PH & 27

JN | | PM 3-37

COVER LETTER

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

SUBJECT:	JEZUS	M CORP	
----------	--------------	--------	--

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

closed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	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 CO	PY REQUIRED

M:	ZULMA A. MARTINEZ
•••	Name (Printed or typed)
	1175 CEDAR FALLS DRIVE
-	Address
	WESTON, FL 33327
•	City, State & Zip
	(424) 230-6389
•	Daytime Telephone number
	ZULMAANTELIZ@HOTMAIL.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)

ESTON; FL 33327	Mailing address, if different	is: .
75 CEDAR FALLS DR. ESTON, FL 33327 FICLE III PURPOSE EXPORT		
ESTON, FL 33327	T & IMPORT SALES	
TICLE III PURPOSE EYDODT	T & IMPORT SALES	
	T & IMPORT SALES	
	T & IMPORT SALES	
purpose for which the corporation is organized is:	T & IMPORT SALES	
		NG A
	*	
		= (E)
	-	
	3	2 点
****		16.82
	CA CA	
RTICLE V INITIAL OFFICERS AND/OR DIRECTORS		
Name and Title: ZULMA A. MARTINEZ PRESIDENT N	JORGE E. MENDOZA CEO/VIC	E PRESI
1175 CEDAD EALLS DD	Address: 1175 CEDAR FAL	LS [
WESTON, FL 33327	WESTON, FL 3	
**===:0:1;	11-01-011, 1-2-0	3327
		3327
		3327
	Name and Title	
Name and Title:N		
Name and Title:N		
Name and Title:N		
Name and Title:N		
Name and Title:N AddressA	Address:	
Name and Title:N AddressA	Address: Name and Title:	

Name and	Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	
	orida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	ZULMA A. MARTINEZ	
Address:	1175 CEDAR FALLS DR.	
	WESTON, FL 33327	
ARTICLE VII	INCORPORATOR	
The <u>name and add</u>	<u>dress</u> of the Incorporator is:	
Name:	ZULMA A. MARTINEZ	
Address:	1175 CEDAR FALLS DR.	
	WESTON, FL 33327	
	ed as registered agent to accept service of process j m familiar with and accept the appointment as regi	for the above stated corporation at the place designated in stered agent and agree to act in this capacity
	ZHEAA TEARTING DOT	06/05/2014
	Required Signature/Registered Agent/	Date
I submit this docu document to the D	ment and affirm that the facts stated herein are to epartment of State constitutes a third degree felony	rue. I am aware that the false information submitted in a sa provided for in s.817.155, F.S.
9	Required Signature/Incorporator	7 05/05/2014 Date