

PI4UXX 63/70

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(Address)

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(Business Entity Name)

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Certificates of Status ☒

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2014 JUL 23 PM 2:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** Jennecho Technologies, 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:** Jennifer Peraza-Lopez

Name (Printed or typed)

10458 SW 49th Place

Address

Cooper City, FL 33328

City, State & Zip

954-444-5636

Daytime Telephone number

jennecho@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: Jennecho Technologies, Inc.

**FILED**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2014 JUL 23 PM 2:11  
Mailing address, if different is:

10458 SW 49th Place

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Cooper City, FL 33328

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ultrasound scans.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Jennifer Peraza-Lopez President

Name and Title: \_\_\_\_\_

Address 10458 SW 49th Place

Address: \_\_\_\_\_

Cooper City, FL 33328

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: Jennifer Peraza-Lopez

Address: 10458 SW 49th Place

Cooper City, FL 33328

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Jennifer Peraza-Lopez

Address: 10458 SW 49th Place

Cooper City, FL 33328

*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

11-19-14

\_\_\_\_\_  
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

7-19-14

\_\_\_\_\_  
Date