

2
PI5000001509

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

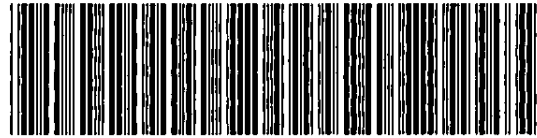
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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01/07/15--01003--019 **78.75

15 JAN -7 PM 1:50
15 JAN -7 PM 1:50

COVER LETTER.

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

SUBJECT: JG & SONS LOGISTICS 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: JULIO GOMEZ
Name (Printed or typed)
925 WHISPERING CYPRESS LN
Address
ORLANDO FL 32824
City, State & Zip
321-443-5178
Daytime Telephone number
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:

JG & SONS LOGISTICS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

925 WHISPERING CYPRESS LN

ORLANDO FL 32824

Mailing address, if different is:

925 WHISPERING CYPRESS LN

ORLANDO FL 32824

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ALL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **CEO- JULIO GOMES**

Name and Title:

Address **925 WHISPERING CYPRESS LN**

Address:

ORLANDO FL 32824

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: JULIO GOMEZ
Address: 925 WHISPERING CYPRESS LN
ORLANDO FL 32824

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JULIO GOMEZ
Address: 925 WHISPERING CYPRESS LN
ORLANDO FL 3224

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

01/07/2015
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

01/07/2015
Date