

P150000D6D61

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

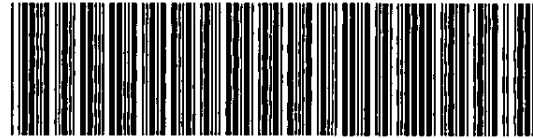
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/20/15--01050--005 **78.75

15 JAN 20 PM 2:22
ALLIANCE, FLORIDA

WMD 1/23

COVER LETTER

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

SUBJECT: **JJ CORALS 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: **SJ COOPER & ASSOCIATES**

Name (Printed or typed)

4001 SANTA BARBARA BLVD # 366

Address

NAPLES, FL 34104

City, State & Zip

239-398-3837

Daytime Telephone number

steven@sjcfinance.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: JJ CORALS INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

3000 56TH STREET W
LEHIGH ACRES, FL 33971

Mailing address, if different is:

C/O 3269 STURGEON BAY COURT
NAPLES, FL 34120

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: A PROFESSIONAL MARKETING CORPORATION

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JACOB WISE. PRESIDENT

Address: 3000 56TH STREET W
LEHIGH ACRES, FL 33971

Name and Title: ALICIA LOGAN, V PRESIDENT

Address: 3000 56TH STREET W
LEHIGH ACRES, FL 33971

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

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: STEVEN COOPER
Address: 4001 SANTA BARBARA BLVD # 366
NAPLES, FL 34104


ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: STEVEN COOPER
Address: 4001 SANTA BARBARA BLVD # 366
NAPLES, FL 34104

FILED
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CLERK OF THE STATE
NAPLES, FLORIDA

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

01/13/2015

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

01/13/2015

Date