P15000038054

(Requestor's Name)				
(Address)				
(Ad	idress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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REGELIARY OF STATE

The Albert

COVER LETTER

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

SUBJECT:	PROPOSED CORPORA	L131alla71	on corp.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)	
Enclosed are an orig	ginal and one (1) copy of the arti	cles 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	
		ADDITIONAL CO	Status DPV DEOLUDED	
	ADDITIONAL COPY REQUIRED			
FROM: ManueLita PadiLLa Name (Printed or typed)				
7234 Northbridge BlVd				
Address				
Tampa FL 33615 City, State & Zip				
	813 3003971 Daytime To	elephone number	, , , , , , , , , , , , , , , , , , ,	
	Jackeline Installa E-mail address: (to be used	ation Corporation for future annual report	agmail. Cor	

NOTE: Please provide the original and one copy of the articles.



March 17, 2015

MANVELITA PADILLA 7234 NORTHBRIDGE BLVD. TAMPA, FL 33615

SUBJECT: JACKELINE INSTALLATION CORP.

Ref. Number: W15000019015

We have received your document for JACKELINE INSTALLATION CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

The document is illegible and not acceptable for imaging.

A corporation may not serve as its own incorporator. Please designate the individual whose typed signature appears on the signature line.

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: 615A00005393



April 9, 2015

MANVELITA PADILLA 7234 NORTHBRIDGE BLVD. TAMPA, FL 33615

SUBJECT: JACKELINE INSTALLATION CORP.

Ref. Number: W15000019015

We have received your document for JACKELINE INSTALLATION CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

A corporation may not serve as its own incorporator. Please designate the individual whose typed signature appears on the signature line.

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: 615A00005393

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corpora	ME tion shall be: Yes 6	eline In	stallation (
ARTICLE II PRI	NCIPAL OFFICE Principal street address Not thorodge Blvd FL 33615	Maili 	ng address, if different is:
A DOUGLE III DIG	PROGR		
	the corporation is organized is:		
			2015 APP T
ARTICLE IV SH	ARES 2 / 2 / 2 / 4 / 4 / 4 / 4 / 4 / 4 / 4 /		7 PH 3:14
ARTICLE V INI	stock is: 30 / 30 / 30 / 10	···	O,
Name and Titl Address	Manuel Ta Padiila, Cel 7234 Northbridge Blv	Name and Title: Address:	
	Boshares		
Name and Title	Jorge Padina, CFC		
	Tampa PL 33615 30 Shares		
Name and Title	Jackeline Celis, Se	Cretary Name and Title:	
Address -	7234 Northbridge Blv Tampa FL 33615		
	30 Shares		

Name and	Title: Jesus M. Morel, Coo Name and Title	,
Address	8323 N. Rome Ave Address:	
	Tampa FL 33604	
	10 shales	
	REGISTERED AGENT	
the <u>name and Flo</u>	orida street address (P.O. Box NOT acceptable) of the registered age	ent is:
Name:	Manuelita Padilla	
Address:	7234 Northbridge Blud	
	Tampa FL 33615	
ARTICLE VII	INCORPORATOR	
The <u>name and ad</u>	dress of the Incorporator is:	
Name:	Manuelita Padilla	
Address:	7234 Northbridge Blud	
	Tampa FL 33615	
	ed as registered agent to accept service of process for the above sta m familiar with and accept the appointment as registered agent and	
	Worth States	3-31-15
	Required Signature/Registered Agent	Date
	iment and affirm that the facts stated herein are true. I am aware pepartment of State constitutes a third degree felony as provided for	
	latatedalo	3-31-15
	Required Signature/Incorporator	Date