(Requestor's Name)		
(Address)		
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
_	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only

JUN 1 1 2015 T. SCOTT



200271338572

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 663589 7443826

AUTHORIZATION :

COST LIMIT : \$ 78.75

ORDER DATE : June 10, 2015

ORDER TIME : 1:23 PM

ORDER NO. : 663589-005

CUSTOMER NO: 7443826

DOMESTIC FILING

NAME: JORDAN JOSEPH, INC.

EFFECTIVE DATE:

XX	ARTICLES OF INCORPORATION
	CERTIFICATE OF LIMITED PARTNERSHIP
	ARTICLES OF ORGANIZATION
PLEASE	RETURN THE FOLLOWING AS PROOF OF FILING:
XX	CERTIFIED COPY
	PLAIN STAMPED COPY
	CERTIFICATE OF GOOD STANDING
CONTACI	F PERSON: Courtney Williams - EXT. 62935
	EXAMINER'S INITIALS:

COVER LETTER

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

SUBJECT: Jordan	Joseph, Inc.		
JOBSEC1	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed 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
		ADDITIONAL CO	PY REQUIRED
FROM:	Gutt	e (Printed or typed)	
299	9 N.E. 191st Street, Fifth Floor		
		Address	
Ave	ntura, FL 33180		
	City	State & Zip	
305-	931-3771		
	Daytime 7	elephone number	
igutt	@bgglaw.com		
	E-mail address: (to be use	d for future annual report r	otification)

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)

The rema of the compare		
The name of the corpora		
<u>ARTICLE II PRINC</u>	Principal street address	Mailing address, if different is:
2603 Oakbrook Dr.		
Weston, Florida 33332		
	<u> </u>	
ARTICLE III PURP The purpose for which to	OSE the corporation is organized is:	iness
		
ARTICLE IV SHAR		
The number of shares of	Stock is:	
ARTICLE V INITIA	AL OFFICERS AND/OR DIRECTORS	
Name and Titl	Jordan Gutt Brac Trees Sec Director	Name and Title:
	2603 Oakbrook Dr.	
Address	Weston, Florida 33332	
Name and Title	· 	Name and Title:
		<u> </u>
Address		_ Address:
Name and Title	**	Name and Title:
Address		Address:

Name a	and Title:	Name and Title:
Addre	ss	Address:
	REGISTERED AGENT	
he <u>name and l</u> Jame:	Florida street address (P.O. Box NOT acceptab Ira Gutt	le) of the registered agent is:
Address:	2999 N.E. 191st Street, Fifth Floor	
	Aventura, FL 33180	
RTICLE VII	INCORPORATOR	
he <u>name and a</u>	address of the Incorporator is:	
Name:	Ira Gutt	
Address:	2999 N.E. 191st Street, Fifth Floor	
	Aventura, FL 33180	
ARTICLE VIII	<u>EFFECTIVE DATE:</u>	
ffective date, i	if other than the date of filing:	(OPTIONAL)
ays after the i		annot be more than five business days prior or 90 business
	te inserted in this block does not meet the applic effective date on the Department of State's reco	table statutory filing requirements, this date will not be listed as ords.
faving been na his certificate, l Ira Gutt	amed as registered agent to accept service of pro I am familiar with and accept the appointment a	ocess for the above stated corporation at the place designated in s registered agent and agree to act in this capacity
Зу:	() L H	10-10-15
	Required Signature/Registered Agent	Date
	ocument and affirm that the facts stated herein e Department of State constitutes a third degree j	are true. I am aware that the false information submitted in a felony as provided for in s.817.155, F.S.
	uired Signature/Incorporator	6-10-15