

P15000055508

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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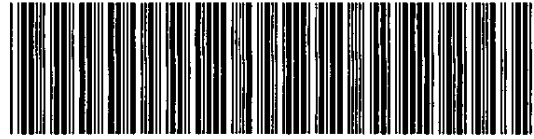
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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15 JUN 29 AM 10:35  
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MD 7/1

## COVER LETTER

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

**SUBJECT:** J & D TREASURE CORPORATION  
**(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Joseph J. Portuondo, Esq  
Name (Printed or typed)

110 Merrick Way, Suite 3-B  
Address

Coral Gables, Florida 33134  
City, State & Zip

(305) 666 - 6640  
Daytime Telephone number

jjp@portuondolaw.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: J & D Treasure Corporation

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

110 Merrick Way

Suite 3-B

Coral Gables, Florida 33134

Mailing address, if different is:

same

same

same

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: This corporation is organized for the purpose of  
transacting any and all lawful business permitted under the laws of the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

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

Name and Title: Joseph J. Portuondo - President

Address 110 Merrick Way

Suite 3-B

Coral Gables, Florida 33134

Name and Title: Joseph J. Portuondo - Treasurer

Address: 110 Merrick Way

Suite 3-B

Coral Gables, Florida 33134

Name and Title: Joseph J. Portuondo - Secretary

Address 110 Merrick Way

Suite 3-B

Coral Gables, Florida 33134

Name and Title: N/A

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

Name and Title: N/A

Address \_\_\_\_\_

Name and Title: N/A

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

Name and Title: N/A Name and Title: N/A  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Joseph J. Portuondo  
Address: 110 Merrick Way, Suite 3-B  
Coral Gables, Florida 33134

15 JUN 29 AM 10:35  
FILED  
CLERK OF COURT  
JULIA A. JONES

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Joseph J. Portuondo  
Address: 110 Merrick Way, Suite 3-B  
Coral Gables, Florida 33134

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: N/A (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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  
June 23, 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  
June 23, 2015  
Date