

P15000079998

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

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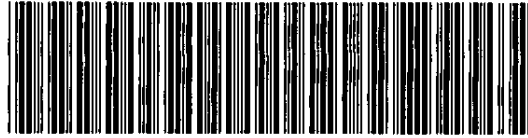
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/03/15--01006--009 **78.75

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2015 SEP 25 PM 2:46

RECEIVED

~~W15000079998~~
*WS 9/25/15

COVER LETTER

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

SUBJECT: CJ Enterprises, 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: Beryl Stokes, CPA

Name (Printed or typed)

1035 W Dixie Avenue

Address

Leesburg, FL 34748

City, State & Zip

352-678-6078

Daytime Telephone number

chapmanjosie@yahoo.com

Josie.smith.22@outlook.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 15, 2015

BERYL STOKES
1035 W DIXIE AVENUE
LEESBURG, FL 34748

SUBJECT: CJ ENTERPRISES, INC.
Ref. Number: W15000060519

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

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The name and document number of conflict is, " L03000043632 - CJ ENTERPRISES LLC".

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: 315A00019393

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: CJ enterprises of Central Florida, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal Street Address

Mailing address, if different is:

153 Bouganvillea Dr

Same

Leesburg, FL 34748

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in business for profit through internet sales.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Chandler Smith, President

Address: 153 Bouganvillea Dr

Leesburg, FL 34748

Name and Title: Josie Smith, Sec/Treas

Address: 153 Bouganvillea Dr

Leesburg, FL 34748

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2015 SEP 25 PM 2:46
CLERK OF DISTRICT COURT
STATE OF FLORIDA
CLERK OF DISTRICT COURT

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: Chandler Smith
Address: 153 Bouganvillea Drive
Leesburg, FL 34748

ARTICLE VII INCORPORATOR

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

Name: Beryl N Stokes, CPA
Address: 1035 W Dixie Avenue
Leesburg, FL 34748

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (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

Chandler Smith
Required Signature/Registered Agent

9/22/15
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.

Beryl N Stokes
Required Signature/Incorporator

9/22/15
Date