

P1600W13220

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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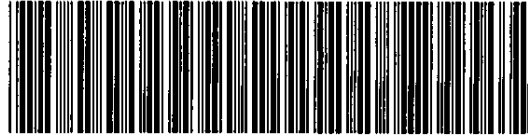
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FEB 10 2016

T. SCOTT

16 FEB -1 PM 12:10

COVER LETTER

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

SUBJECT: JEANNES FLA STORE 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Jeannes FLA Store INC
Name (Printed or typed)

1712 S. Congress Ave
Address

Palm Springs, FL 33461
City, State & Zip

617-513-4701
Daytime Telephone number

daleyjeanne@yahoo.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: Jeannes FLA Store *JNC*

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1712 S. Congress Ave

Palm Springs, FL 33461

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: retail sales chocolte covered fruit (Edible Arrangements)

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jean Swierski President

Name and Title: Richard Coyne Ex Officer

Address 1712 S. Congress Ave

Address: 7722 Bay Lake Dr

Palm Springs, FL 33461

Fort Myers, FL 33907

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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: Richard Coyne _____

Address: 7722 Bay Lake Dr. _____

Fort Myers, FL 33907 _____

ARTICLE VII INCORPORATOR

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

Name: Jeanne Swierski _____

Address: 1712 S. Congress Ave _____

Palm Springs, FL 33461 _____

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/28/2016 (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

Richard Coyne

Required Signature/Registered Agent

1/28/16

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.

Jeanne Swierski

Required Signature/Incorporator

1/28/16

Date