P16000029048

(Re	questor's Name)		
(Address)			
(Ad	dress)	<u></u>	
(Cit	y/State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nam	ne)	
(Do	cument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		
		:	
		R	

Office Use Only



200282938252

03/07/16--01035--008 **87.50

Mary

16 HAR 30 PH II: 50
SEGNELLARY OF STATE

04-01-12

COVER LETTER

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

SUBJECT: F & J Je	welry Antiques, Inc.		
SUBJECT:	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	JDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of
		ADDITIONAL CO	Status PY REQUIRED
Fre FROM:	dy O. Chacon		
rkow:	Nam	e (Printed or typed)	
2	200 NE 15T		
		Address	
Mia	ımi, FL 3313 2 -		
	City	, State & Zip	
786	-488-0642		
.,	Daytime '	Telephone number	
fred	yochaconr@hotmail.com		
	E-mail address: (to be use	ed for future annual report i	notification)

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



March 16, 2016

FREDY O. CHACON 200 NE 1ST MIAMI, FL 33132

SUBJECT: F & J JEWELRY ANTIQUES, INC.

Ref. Number: W16000019648

We have received your document for F & J JEWELRY ANTIQUES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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.

Letter Number: 616A00005409

Tim Burch Regulatory Specialist II

www.sunbiz.org

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

<u>FICLE II PRI</u>	NCIPAL OFFICE Principal <u>street</u> address		Mailing address,	if different is:
Ne 1st. Street				
ımi Fl 33132				
FICLE III PUR purpose for whic	h the corporation is organized is:	ransact any and all lawful	business.	16 HAR SECREJ TALLAH
				30 PH
			W 1 ± 1	STATE LORIDA
				·
number of shares	of stock is:			
4	of stock is:	<u>DRS</u>	John W. Conzal	lez VP
number of shares . TICLE V INIT	of stock is:	DRS Name and Title	: John W. Gonzal 2227 SW 3rd Av	
number of shares TICLE V INIT Name and T	of stock is: [IAL OFFICERS AND/OR DIRECTO] itle: 149 E Enid Drive	ORS Name and Title		ve
number of shares TICLE V INIT Name and T	of stock is: FIAL OFFICERS AND/OR DIRECTO itle: Fredy O. Chacon PD 149 E Enid Drive Key Biscayne, Fl 33149	ORS Name and Title	2227 SW 3rd Av Miami Fl 33130	ve
number of shares TICLE V INIT Name and T Address	of stock is: FIAL OFFICERS AND/OR DIRECTO itle: Fredy O. Chacon PD 149 E Enid Drive Key Biscayne, Fl 33149	Name and Title Address: Name and Title	2227 SW 3rd Av Miami Fl 33130	ve
number of shares TICLE V INIT Name and T Address Name and Ti	of stock is: FIAL OFFICERS AND/OR DIRECTO itle: 149 E Enid Drive Key Biscayne, Fl 33149	Name and Title Address: Name and Title	2227 SW 3rd Av Miami Fl 33130	ve
number of shares TICLE V INIT Name and T Address Name and Ti Address	of stock is: FIAL OFFICERS AND/OR DIRECTO itle: 149 E Enid Drive Key Biscayne, Fl 33149	Name and Title Address: Name and Title Address: Address: Address:	2227 SW 3rd Av Miami Fl 33130	ve

Name a	nd Title:	Name and Title:
Addres		Address:
		
ARTICLE VI		
The <u>name and I</u>	Florida street address (P.O. Box NOT accep	table) of the registered agent is:
Name:	Fredy O. Chacon	
Address:	149 E Enid Drive	
	Key Biscayne, F1 33149	······································
ARTICLE VII	<u>INCORPORATOR</u>	AEE 1
The name and	address of the Incorporator is:	E mayor
	Fredy O. Chacon	
Name:		
Address:	149 E Enid Drive	
	Key Biscayne, Fl 33149	— ORIGO
Effective date, i		. (OPTIONAL) d cannot be more than five business days prior or 90 business
	te inserted in this block does not meet the appetfective date on the Department of State's re	plicable statutory filing requirements, this date will not be listed as ecords.
		f process for the above stated corporation at the place designated in nt as registered agent and agree to act in this capacity
	Required Signature/Registered Ag	ent Date
	ocument and affirm that the facts stated her 2 Department of State constitutes a third degr	rein are true. I am aware that the false information submitted in a ree felony as provided for in s.817.155, F.S.
177	Ly Chacon	<u>03-23-</u> 16,
Regi	uired Signature/Incorporator	Date