## P16000034173

(Red	questor's Name)			
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## **COVER LETTER**

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

SUBJECT: RE	JOVENIR, CORP		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )
Enclosed are an orig	ginal and one (1) copy of the art	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 Status
		ADDITIONAL CO	OPY REQUIRED
FROM:	RAMON GARCIA JR.		
	Name	e (Printed or typed)	
	6912 SW 158TH PASS		
-		Address	
	MIAMI, FL. 33193		
	City,	State & Zip	
	305-766-2412		
	Daytime T	elephone number	
	E-mail address: (to be use	d 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)

FILED

ARTICLE I NAME The name of the corporat	ion shall be: REJOVENIR, CORP	, , ,	16 APR 12 PM 4: 06
ARTICLE II PRINC	I <u>PAL OFFICE</u> Principal <u>street</u> address	Mailing	SECRETARY OF STATE address, if different is: FLORIDA
MIAMI, FL. 33193			
ARTICLE III PURPO The purpose for which the	NSE ne corporation is organized is: _TO CONI	DUCT ANY AND ALL LI	EGAL BUSINESS IN
FLORIDA			
	// <u> </u>		
····			
ARTICLE IV SHARE The number of shares of s  ARTICLE V INITIA		<del></del>	
Name and Title	RAMON GARCIA JR, PRESIDENT	Name and Title:	
Address	6912 SW 158TH PASS	Address:	
	MIAMI, FL. 33193		
Name and Title:		Name and Title:	
Address			
	**************************************		
Name and Title:		Name and Title:	
Address			
		***************************************	

Address  ARTICLE VI R.	EGISTERED AGENT rida street address (P.O. Box NOT acceptable	Address:	FILED  16 APR 12 PM 4: 06  SECRETARY DESIGNATE TALLAHASSEF FLORIDA
ARTICLE VI R. The name and Flo	rida street address (P.O. Box NOT acceptabl		SECRETARY STATE TALLAHASSEF FLORIDA
The name and Flo	rida street address (P.O. Box NOT acceptabl	e) of the registered age	
Nomai		o) of the registered age	ent is:
Name.	RAMON GARCIA JR.		
Address:	6912 SW 158TH PASS		
	MIAMI, FL. 33193		
ARTICLE VII II	NCORPORATOR		
The <u>name and add</u>	lress of the Incorporator is:		
Name:	RAMON GARCIA JR.		
Address:	6912 SW 158TH PASS		
	MIAMI, FL. 33193		
Effective date, if of (If an effective dadays after the filin Note: If the date in	te is listed, the date must be specific and ca	able statutory filing rec	ve business days prior or 90 business
Having been name this certificate it an	ed as registered agent to accept service of pro n familiar with and accept the appointment as	cess for the above sta registered agent and	agree to act in this capacity
— Jan	Required Signature/Registered Agent	· · · · · · · · · · · · · · · · · · ·	3/31/16 Date
document to the De	ment and affirm that the facts stated herein epartment of State constitutes a third degree for the statute of State constitutes a third degree for the statute of State constitutes a third degree for the statute of th	are true. I am aware	that the false information submitted in a in s.817.155, F.S.  3/31/16  Date