

P16000045951

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

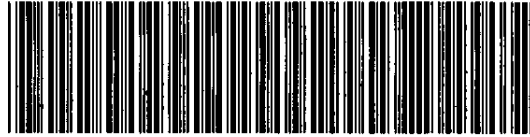
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Spoke to Jerusha W. via ph.
5/25/16 - OK to add "Inc."
on Articles.
TLH 5-25-16

Office Use Only



400284982084

04/25/16--01037--011 **87.50

WIK-32332

FILED
16 MAY 16 PM 2:06
SECRETARY OF STATE
TALLAHASSEE FLORIDA
TLH
5-25-16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 3, 2016

JERUSHA WILLIAMS
1821 N.W. 45 STREET
MIAMI, FL 33142

SUBJECT: BROKJADA INC.
Ref. Number: W16000032332

We have received your document for BROKJADA 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):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The registered agent must sign accepting the designation.

Registered agent & Incorporator must be designated well.

Incorporator must sign

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.

TANYA L HENDERSON
Regulatory Specialist II

Letter Number: 816A00009094

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16 MAY 16 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

16 MAY 16 PM 12:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Brokjada 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: Jerusha Williams

Name (Printed or typed)

1821 N.W. 45 Street

Address

Miami, Florida 33142

City, State & Zip

305-321-0491

Daytime Telephone number

candylady12.w@gmail.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: Brokjada **INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1821 N.W. 45 Street

Miami, FL 33142

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: for consulting and customer service

ARTICLE IV SHARES

The number of shares of stock is: 100

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TALLAHASSEE FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jerusha Williams, President

Name and Title: Brittany Williams-Sanders, VP

Address: 1821 N.W. 45 Street

Address: 1821 N.W. 45 Street

Miami, Florida 33142

Miami, Florida 33142

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: Jerusha Williams
Address: 1821 N.W. 45 Street
Miami, Florida 33142

ARTICLE VII INCORPORATOR

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

Name: Jerusha Williams
Address: 1821 N.W. 45 Street
Miami, Florida 33142

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TALLAHASSEE, FLORIDA

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

Required Signature/Registered Agent

4/6/16
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.

Required Signature/Incorporator

4/6/16
Date