

P/6000049/65

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

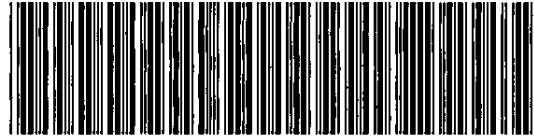
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FILED
STATE OF TEXAS
COUNTY OF DALLAS
JUL 19 2016

W16-037837

06/07/16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 24, 2016

JACQUES SINEUS
2650 DUPONT AVE. #2B
JACKSONVILLE, FL 32217

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

16 JUN -6 PM 4:09

RECEIVED

SUBJECT: PINEAPPLE'S CARIBBEAN AMERICAN RESTAURANT
Ref. Number: W16000037837

We have received your document for PINEAPPLE'S CARIBBEAN AMERICAN RESTAURANT 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of 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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 016A00010929

COVER LETTER

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

SUBJECT: Pineapple's Caribbean American Restaurant

(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: Jacques Sineus

Name (Printed or typed)

2650 Dupont Ave #2B

Address

Jacksonville, Florida 32217

City, State & Zip

(904)236-9849

Daytime Telephone number

sinejay@yahoo.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

May 24, 2016

JACQUES SINEUS
2650 DUPONT AVE. #2B
JACKSONVILLE, FL 32217

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Letter Number: 016A00010929

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: Pineapple's Caribbean American Restaurant, *INC.*

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2151 Lane Ave South

Jacksonville, Florida 32210

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide some great Caribbean American Cooking to the Jacksonville Community.

ARTICLE IV SHARES

The number of shares of stock is: *1*

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jacques Sineus

Name and Title:

Address

2650 Dupont Ave #2B

Address:

Jacksonville, Florida 32217

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: Jacques Sineus
Address: 2650 Dupont Ave # 2B
Jacksonville, Florida 32217

ARTICLE VII - INCORPORATOR

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

Name: Jacques Sineus
Address: 2650 Dupont Ave # 2B
Jacksonville, Florida 32217

FILED
DEPT. OF STATE
JAN 11 2017
JAN 11 2017

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

05/12/2016

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

05/12/2016

Date