

P16000062515

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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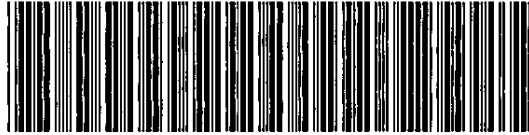
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 JUL 15 PM 3:40

COVER LETTER

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

SUBJECT: YOGI . JPG, CORP

(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: Guillermo A Antonini

Name (Printed or typed)

9805 NW 52nd Street, # 319

Address

Doral, Florida 33178

City, State & Zip

305-305-6070

Daytime Telephone number

guillermotcp@gmail.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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: YOGI . JPG, CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9805 NW 52nd Street, # 319

Doral, Florida 33178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business.

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ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Guillermo A Antonini, P

Name and Title: Guillermo T Antonini, VP

Address 9805 NW 52nd Street, # 319

Address: 9805 NW 52nd Street, # 319

Doral, Florida 33178

Doral, Florida 33178

Name and Title: Guillermo A Antonini, S

Name and Title: Guillermo T Antonini, T

Address 9805 NW 52nd Street, # 319

Address: 9805 NW 52nd Street, # 319

Doral, Florida 33178

Doral, Florida 33178

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: Guillermo T Antonini

Address: 9805 NW 52nd Street, # 319

Doral, Florida 33178

ARTICLE VII INCORPORATOR

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

Name: Guillermo A Antonini

Address: 9805 NW 52nd Street, # 319

Doral, Florida 33178

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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

07/10/2016

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

07/10/2016

Date