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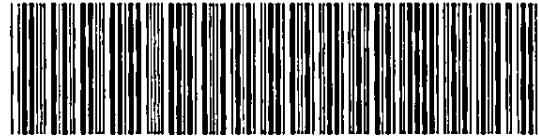
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FALLAN STATE RECORDS

COVER LETTER

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

SUBJECT: JTS Williams Incorporation
(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
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 COPY REQUIRED

FROM: Jenella Tionca Williams
Name (Printed or typed)

1063 N.W. 76 Street
Address

Miami, FL 33150
City, State & Zip

305-301-0336
Daytime Telephone number

all8ueendup@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: JTS Williams Incorporation

ARTICLE II PRINCIPAL OFFICE

Principal street address

Jenella Williams
1063 NW 76 St.
Miami, Fl. 33150

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in any lawful
corporate activity in the state of Florida.
JTS Williams Incorporation will provide
services to families all year around.

ARTICLE IV SHARES

The number of shares of stock is: 10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jenella Williams/CEO Name and Title: Senella Clinch/COO

Address: 1063 NW 76 St. Address: 1063 NW 76 St.
Miami, Fl. 33150 Miami, Fl. 33150

Name and Title: Carlton Rhem/CFO Name and Title: Shennae Smith/Secretary

Address: 1063 NW 76 St. Address: 5248 NW 194 Lane
Miami, Fl. 33150 Miami Gardens, Fl. 33055

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: JeneNa Williams
Address: 1063 NW 76 St.
Miami, FL 33150

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CLERK OF COURT
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Senella Clinch
Address: 1063 NW 76 St.
Miami, FL 33150

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 days prior or 90 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

JeneNa Williams
Required Signature/Registered Agent

11/21/2017
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.

Senella Clinch
Required Signature/Incorporator

11/21/2017
Date