Division of Corporations Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : BOOKKEEPING DONE RIGHT INC

Account Number : I20200000064 Phone : (786)273-7055

Fax Number : (111)111-1111

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Address:			
	Address:	Address:	Address:

## FLORIDA PROFIT/NON PROFIT CORPORATION JIZIQYAHU CREDIT INC

Certificate of Status (	
Certified Copy	0
Page Count 01	
Estimated Charge	\$70.00

J. FASON

JUL 3 0 2020

2020 JUL 29 AH II: 29

Electronic Filing Menu

Corporate Filing Menu

Help

To:

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME. The name of the corporate	2 ation shall be: JIZIQYAHU CREDIT	INC	
ARTICLE II PRIN 10230 SW 212 St Cutler Bay, FL		Mailing ad	ddress, if different is:
ARTICLE III PURF The purpose for which	POSE the corporation is organized is: any and	all lawful busines	s .
			202
ARTICLE IV SHAI The number of shares o	fstock is: 100		2020 JUL 29 AM
	AL OFFICERS AND/OR DIRECTORS lc:Montero, Ariel President	Name and Title:	AM 10: 2
Address	10230 SW 212 Street		<b>O</b>
	Cutler Bay, FL 33189		
Name and Titl	e:	Name and Title:	
Address		Address:	
	-1		
Name and Titl	e:	Name and Title:	
Address		Address:	
		_	

Name a	and Title:	_ Name and Title:	
Addre	ss	_ Address:	
		<del></del>	
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable) o	f the registered agent is:	
Name:	Bookkeeping Done Right Inc.	_	
Address:	4700 NW 7th Street Suite 10	_	
	Miami, FL 33126	-	
ARTICLE VII	INCORPORATOR		
The name and	address of the Incorporator is:	. • :	20:
Name:	Bookkeeping Done Right Inc.		ĮĮ, 03
Address:	4700 NW 7th Street Suite 10	- <u>î</u>	L 29
	Miami, FL 33126		
ARTICLE VIII	EFFECTIVE DATE: if other than the date of filing: 07/29/2020	(OPTIONAL)	AHI 10: 28
	date is listed, the date must be specific and cann		after th
Note: If the da	te inserted in this block does not meet the applicable effective date on the Department of State's records		not be li
	amed as registered agent to accept sendee of process a familiar with and accept the appointment as registe		esignate
Aylen	M Armas-Ocejo	07/29/2	2020
	Required Signature/Registered Agent	Di	ate
	оситенt and affirm that the facts stated herein are e Department of State constitutes a third degree felor		submit

Fax: (850) 617-6381

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From: AYLEN ARMAS-OCEJO Fax: 12058811104

To: