

11/12/2020

**P2000088330**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H20000391726 3)))



H200003917263ABC/

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To:  
Division of Corporations  
Fax Number : (850)617-6381

From:  
Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (800)221-2972  
Fax Number : (917)243-5843

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

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
JC RACING CORP.**

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

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November 13, 2020

FLORIDA DEPARTMENT OF STATE

Division of Corporations

BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

SUBJECT: JC RACING CORP.  
REF: W20000130021

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain both the street address of the principal office and the mailing address of the entity.

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.

Jalesa S Dennis  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H20000391726  
Letter Number: 020A00022680

## COVER LETTER

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

SUBJECT: JC RACING 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  
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: \_\_\_\_\_  
Name (Printed or typed) DAVID A. LUCCI  
CERTIFIED PUBLIC ACCOUNTANT  
39 HIGHLAND ROAD  
Address GLEN COVE, N.Y. 11542  
\_\_\_\_\_  
City, State & Zip  
\_\_\_\_\_  
Daytime Telephone number 516-686-6824  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification) dan@ja911@gmail.com

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 JC RACING CORP.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

15413 2nd CHESHAM TRAIL

Mailing address, if different is:

CUTIS FL 32726

DAVID A. LUCCI  
CERTIFIED PUBLIC ACCOUNTANT  
39 HIGHLAND ROAD  
GLEN COVE, N.Y. 11542

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MOTORCYCLE RACING

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DAVID A LUCCI CPA - DIRECTOR

Address: 39 HIGHLAND ROAD

GLEN COVE, NY 11542

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

2011

11:11

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: MARC COOPER  
Address: 15413 OLD CHISHOLM TRAIL  
EUSTIS, FL 32726

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

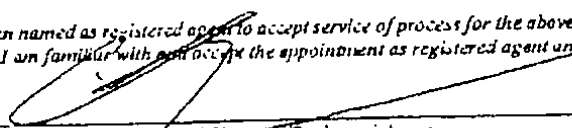
Name: DAVID A LUCCI CPA  
Address: 39 HIGHLAND ROAD  
GLEN COVE, NY 11542

**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.)

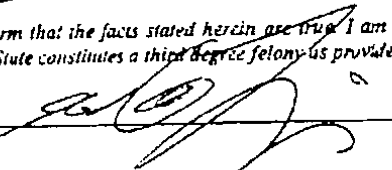
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

  
\_\_\_\_\_  
Required Signature/Registered Agent

11/11/2020  
\_\_\_\_\_  
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

11/11/2020  
\_\_\_\_\_  
Date