

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

P21000056986

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.

((H21000237539 3)))



H210002375393ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : FASTKIT CORP
Account Number : I20100000009
Phone : (305)599-0839
Fax Number : (305)592-9591

****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

Johnny James Spencer, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

2021 JUN 16 AM 8:18

FILED

CLERK OF COURT
STATE

2021 JUN 16 PM 4:12

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: Johnny James Spencer, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
1920 S. Ocean Blvd Apt 6
Delray Beach, FL 33483

Mailing address, if different is:
1920 S. Ocean Blvd Apt 6
Delray Beach, FL 33483

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any activity or business permitted under the
laws of the United States and the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Johnny James (President)

Name and Title: _____

Address 1920 S. Ocean Blvd Apt 6

Address: _____

Delray Beach, FL 33483

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

2021 JUN 16 AM 8:18
TALLAHASSEE FL
STATE

FILED

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: Johnny James
Address: 1920 S. Ocean Blvd Apt 6
Delray Beach, FL 33483

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Johnny James
Address: 1920 S. Ocean Blvd Apt 6
Delray Beach, FL 33483

2021 JUN 16 AM 8:18
TALLAHASSEE, FL
STATE

FILED

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

Johnny James
Required Signature/Registered Agent

6/15/2021

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.

Johnny James
Required Signature/Incorporator

6/15/2021

Date