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Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : 12000000195 REFERENCE: 964739 8020289 AUTHORIZATION : COST LIMIT : \$ 70.00 ORDER DATE: August 16, 2021 ORDER TIME : 8:31 AM ORDER NO. : 964739-005 CUSTOMER NO: 8020289 DOMESTIC FILING NAME: JUCSA INVESTMENT INC. EFFECTIVE DATE: XX ____ ARTICLES OF INCORPORATION ____ CERTIFICATE OF LIMITED PARTNERSHIP _____ ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

XX PLAIN STAMPED COPY

____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland - EXT.

1201 Hays Street

COVER LETTER

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

SUBJECT: Juc	sa Investment Inc.		
301x/1.C1	(PROPOSED CORPO	RATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an	original and one (1) copy of the	articles of incorporation and	d a check for:
□ \$70.0 Filing Fo	0 ☐ \$78.75 ee Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PPY REQUIRED
FROM:	Marta Garcia	me (Printed or typed)	
	175 SW 7th Street, Suite 1712		
		Address	
	Miami, FL 33130		
	Ci	ty, State & Zip	
	7865988007		
	Daytimo	Telephone number	
	marta.garcia@rclawllp.net		
-	E-mail address: (to be u	sed for future annual report r	otification)

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 corporat	ion shall be:				
ARTICLE II PRINC	TPAL OFFICE Principal <u>street</u> address		Mailing address, if differe	nt is:	
<i>.</i> .	he corporation is organized is:				
Any and all lawful acts	s or activities for which corporation	s may be organized	under Florida law ————————————————————————————————————	.,	(2)
					2121 KING
					<u>.</u>
					===
		===		<u> </u>	35
				<u> </u>	
ARTICLE V INITIA Name and Title	L OFFICERS AND/OR DIRECTORS Judith Cury- P, D		::		
Address	175 SW 7th, Suite 1712	Address:	175 SW 7th, Suite 17	12	
	Miami, FL 33130		Miami, FL 33130		
Name and Title:		Name and Title	:: <u> </u>		
Address		Address:			
Name and Title:		Name and Title	:		
Address		Address:			

Name a	nd Title:	Name and Title:
Addres		
. rudics	<u> </u>	
		
	REGISTERED AGENT lorida street address (P.O. Box NOT accept	able) of the registered agent is:
Name:	Corporation Service Company	
Address:	1201 Hays Street	
714414521	Tallahassee, FL 32301	
ARTICLE VII	INCORPORATOR	
The name and a	ddress of the Incorporator is:	ب کاری می کاری
Name:	Marta Garcia	<u> </u>
Address:	175 SW 7th, Suite 1712	
	Miami, FL 33130	
	EFFECTIVE DATE: Other than the date of filing:	. (OPTIONAL)
(If an effective of filing.)	date is listed, the date must be specific and	I cannot be more than five days prior or 90 days after the
-	e inserted in this block does not meet the and	olicable statutory filing requirements, this date will not be listed
	effective date on the Department of State's r	
Having been nar	ned as registered agent to accept service of pi	ocess for the above stated corporation at the place designated in
certificate, I am	familiar with and accept the appointment as	registered agent and agree to act in this capacity
([] []	exis Weiland, assistant va prosid	
-	Required Signature/Registered Age	ent Date
I submit this doc		ein are true. I am aware that the false information submitted to the felony as provided for in s.817.155, F.S.