9/7/22, 10:09 PM

Division of Corporations

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Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : XOTCHILTH VALDIVIA

Account Number : 120220000026 Phone : (305)332-1478

Fax Number : (305)456-4563

\*\*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:

## FLORIDA PROFIT/NON PROFIT CORPORATION JJ SUNNY SPEECH THERAPY CORP

	Certificate of Status	0
90	Certified Copy	0
ထဲ	Page Count	04
¥.	Estimated Charge	\$70.00

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## COVER LETTER

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

SUBJECT:	JJ SUNNY SPEECH THERAPY CORP  (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)		
	(PROPOSED CORPORA)	TE HABIE - MOST NICE	DIDE SOFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	l 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:		CA JIMENEZ (Printed or typed)	- 93 SEL - 6
	8231 SW 33RD TERR Address		
		<u></u>	
	MIAMI, FL 33155 City, State & Zip		
	•	•	
	786-327-2413  Daytime Telephone number  JESSICAJIMENEZSLP@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)

ICLE II PRINCI	PAL OFFICE Principal street address	Maille	dall to stop
	· <del></del>		dress, if different is:
8231 SW 33F	RD TERR	8231 SW	33RD TERR
MIAMI, FL 33	155	MIAMI, FL	<sub>-</sub> 33155
ICLE III PURPO:	SE		
purpose for which the	e corporation is organized is: PROF	ESSIONAL CORPORATI	ON
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Name and T	Fitle:	Name and Title:	
Address		A didusor	
ARTICLE VI RE	GISTERED AGENT (da street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	JESSICA JIMENEZ	<del></del>	
Address:	8231 SW 33RD TERR	_	
_	MIAMI, FL 33155		
ARTICLE VII IN	<u>CORPORATOR</u>		1.45 2.47 2.50
The name and addr	ess of the Incorporator is:		C C C C C C C C C C C C C C C C C C C
Name:	JESSICA JIMENEZ	_	φ.
Address:	8231 SW 33RD TERR		
	MIAMI, FL 33155	_	<del></del> <del></del>
			0
ARTICLE VIII EXECUTE EXPERIENCE E	er than the date of filing: 09/06/20 is listed, the date must be specific and cann	(OPTIONAL) of be more than five days pr	ior or 90 days after the
Note: If the date inst the document's effect	erted in this block does not meet the applicable tive date on the Department of State's records	e statutory filing requirements	, this date will not be listed as
Having been named certificate, I am fanu	us registered agent to accept service of process iliar with and accept the appointment as registe	for the above stated corporatio, red agent and agree to act in ti	n at the place designated in this his capacity
	Political	- <u>-</u>	09/06/2022
Employee dit is	Required Signature/Registered Agent		Date
i Submit this docum document to the Dep	ent and affirm that the facts stated herein are artment of State constitutes a third degrec felor	t true. I am aware that the fai ny as provided for in s.817.155,	lse information submitted in a F.S.
_	14mm	· - ·	
Required Signature/I	corporator )	Dat	09/06/2022