

P22000082572

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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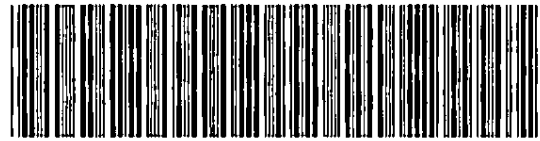
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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10/24/22 -01024-- 001 \*\*70.00

2022 OCT 24 PM 12:11

FILED

October 10th, 2022

FLORIDA DEPARTMENT OF STATE  
New Filing Section  
Division of Corporation  
PO BOX 6327  
TALLAHASSEE, FL 32314

Ref: JC LEON JEWELERS CORP – Doc P21000072302  
NO reinstatement - Release of the Corp Name  
Filing New Articles of Incorporation

Dear Sirs:

JC LEON JEWELERS CORP (Document Number P21000072302) did not file its 2022 Annual Report and now, the corporation appears as Inactive "Admin Dissolution for Annual Report". We will not reinstate the entity and we are releasing its name to be used. Consequently, we are registering JC LEON JEWELERS CORP under the same characteristics. Please find Articles of Incorporation and payment attached.

We apologize for the inconvenience. If you have any question, please contact us at 305-397-5527

Thanks again for your help.

Sincerely,

  
JEAN C LEON PINCAY  
President  
JC LEON JEWELERS CORP

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ED

## COVER LETTER

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

SUBJECT: JC LEON JEWELERS 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee.  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

FROM: MILUSKA BERROCAL  
Name (Printed or typed)

318 NE 5th PL  
Address

FLORIDA CITY, FL 33034  
City, State & Zip

305-519-6768  
Daytime Telephone number

2GB.MBERROCAL@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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FLORIDA  
DIVISION OF  
CORPORATIONS

LD

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: JC LEON JEWELERS CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

15920 SW 109 AVE  
MIAMI FL 33157

\_\_\_\_\_  
\_\_\_\_\_

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: \_\_\_\_\_

ANY AND ALL LAWFUL BUSINESS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JEAN C LEON PINCAY / PRESIDENT

Name and Title: MELODY A ARAUZ / VICE PRESIDENT

Address: 13172 SW 10TH TERRACE DR  
MIAMI FL 33184

Address: 15920 SW 109TH AVE  
MIAMI, FL 33157

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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

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

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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

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

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CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA

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: JEAN C LEON PINCAY  
Address: 13172 SW 10TH TERRACE DR  
MIAMI FL 33184

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: JEAN C LEON PINCAY  
Address: 13172 SW 10TH TERRACE DR  
MIAMI FL 33184

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 10/9/2022 (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*

Jean Leon 10/9/2022  
Required Signature/Registered Agent 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.*

Jean Leon 10/9/2022  
Required Signature/Incorporator Date

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CLD  
STATE  
FLORIDA