Electronic Filing Cover Sheet

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To:

Division of Corporations

3052201440

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 1200000000019 Phone : (305)552-5973 Fax Number : (305)675~5944

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 JENGA SHOPS CORP

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

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Corporate Filing Menu

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLET NAME: The name of the corporation is:

	ARTICLE II PRINCIPAL OFFICE:	
	The principal street address and mailing address is:	
1034 Crestwo	ood Commons Ave Ocoee, FL, 34761	
		•
	·	
ARTICLE III	SHARES: The number of shares of stock is: 100	
ART	ICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	-
De Andrade, Rer	nato - President	
<u> </u>		۲.
		ب –
		<u> </u>
		
		
ARTICLE V	INITIAL REGISTERED AGENT AND STREET ADDRES	8S:
	Florida street address (PO Box not acceptable) of the registered age	
De An <u>drade, Ren</u>	ato	
1034 Crestwood	Commons Ave Ocoee, FL, 34761	
	INCORPORATOR: The name and address of the Incorporate	or is:
ARTICLE VI		-
ARTICLE VI De Andrade, Rena	eto	

Required Signatures:

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

Registered Agent	11/15/2:022
· ·	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.

Renato De Andrade	<u>11/15/2022</u>	
Incorporator.	Date	: - :
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