12/2/22, 1:04 PM



Electronic Filing Cover Sheet

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(((H220004067873)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : VALDES ACCOUNTING AND TAXES, INC.

Account Number : I2012000066 Phone : (305)227-2727 Fax Number : (305)397-2675

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: pedro@valdesaccounting.com

FLORIDA PROFIT/NON PROFIT CORPORATION

J.Bella Distributors Inc

Certificate of Status	(I
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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Help



2022-12-02 18:20:03 GMT

From: Pedro Valdes (305)-397-2675

(((H22000406787 3)))

COVER LETTER

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

SUBJECT: __J.Bella Distributors Inc

(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

Filing Fee

& Certified Copy

Filing Fee, Certified Copy

\$87.50

& Certificate of

Status

ADDITIONAL COPY REQUIRED

ı	•	К	C	I۸.	١:	DESSICA DOBOL	2

Name (Printed or typed)

1471 NW 21ST ST

Address

MIAMI FL 33142-7729

City, State & Zip

Daytime Telephone number

pedro@valdesaccounting.com

E-mail address: (to be used for future annual report notification)

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

(((H22000406787 3)))

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

CLE II PRI	NCIPAL OFFICE		
<u> </u>	Principal street address	Mailing addre	ss, if different is:
NW 21ST ST MI FL 33142-77			
MI FL 33142-77	29		
CLE III PUR	RPOSE th the corporation is organized is:any ar	nd all Lawful Rusiness	
raity/ose for with	or the corporation is organized is,	TO EIII CONTAI DESCRIÇOS	
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CT P 117 CH	enre		
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Page: 4 of 4 2022-12-02 18:20:03 GMT

From: Pedro Valdes (305)-397-2675

(((H22000406787 3)))

Name an	d Title:	Name and Title:		
Address		Address:		
			· · · · · · · · · · · · · · · · · · ·	
ARTICLE VI The name and FI	REGISTERED AGENT orida street address (P.O. Box NOT acceptal	de) of the registered agencies		
Name:	JESSICA DUBOIS			
Address:	1471 NW 21ST ST			
	MIAMI FL 33142-7729			
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>			
The <u>name and ad</u>	dress of the Incorporator is:			
Name:	JESSICA DUBOIS	<u></u>		
Address:	1471 NW 21ST ST			
	MIAMI FL 33142-7729	<u> </u>	6.45 변화 (항)	
			. % :⊃	
<u>ARTICLE VIII</u>	EFFECTIVE DATE:			
Effective date, if	other than the date of filing:	, (OPTIONAL)	1	
– (II an effective d: – Glina V	are is listed, the date must be specific and c	annot be more than five days prior or 90 da	iys after the	
filing.)			<u> </u>	
Note: If the date	inserted in this block does not meet the applications.	able statutory filing requirements, this date w		
the document's et	Tective date on the Department of State's reci	rds.	Ė.	
Having been nam certificate, I um fa	ed as registered agent to accept service of proc miliar with and accept the appointment as reg	ess for the above stated corporation at the plac istered agent and agree to act in this capacity		
13/1/essica.	Gubois Required Signature/Registered Agent	12/2/20)22	
,	Required Signature/Registered Agent		Date	
I submit this docu		are true. I am aware that the false informat	ion submitted in a	
131 Jessica A Required Signatur	Dubois	12/2/2	022	
Required Signatur	e-Incorporator	Date		