12/29/22, 3:20 PM

Division of Corporations

Electronic Filing Cover Sheet

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(((H22000436982 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Adcount Name : HUBCO

Adcount Number : 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.**

HARRY@SAMUELSACCOUNTING.COM

Email Address:_

FLORIDA PROFIT/NON PROFIT CORPORATION

Just Property Management Co

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu Corporate Filing Menu

Help

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DocuSign Envelope ID: E20D5D2A-D8FF-4B96-95BA-C821F79B4BF3

H22000436982

ARTICLES OF INCORPORATION

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

	tion shall be:	Just Property Management Co			
RTICLE II PRINC					
	Principal street address	Mailing addres	s, if different is:		
660 Royal Circle laples, FL 34112					
apies, r.L. 34112					
DETAILS ALL DINGS	age	<u></u>			
RTICLE III PURPO he purpose for which t	(he corporation is organized is: A	ny Legal or Lawful Purpose			
			**** *** * * * * * * * * * * * * * * *		
T = 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1					
					
RTICLE IV SHAR	stock is: 1,500 at No Par Value				
the fightibet of shares of	SIUCN IS.	***************************************			
DTICLE V INITL	AL OFFICERS AND/OR DIRECT	TORS			
			-		
Name and Title	George v Lopez III - Presider	nt/Director Name and Title:			
Address	1660 Royal Circle	Address:			
	Naples, FL 34112		D)		
			.4		
Name and Title		Name and Title			
Name and Title	:	Name and Title:			
Name and Title		Name and Title: Address:			
		Address:			
Address		Address:			
Address		Address:			
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Address Name and Title		Address: Name and Title:			
Address Name and Title		Address: Name and Title:			

cuSign Envelope ID: E20D5	D2A-D8FF-4	896-958A-C821F79B4BF3		H22000436982
Name and	d Title:		Name and Title:	
Address			Address:	
	İ			
ARTICLE VI		ED AGENT address (P.O. Box NOT accepta	hia) of the requirement agent is:	
	ľ	V Lopez III	ore) of the registered agent is:	
Name:				
Address:		yal Circle		
	Naples,	FL 34112		
ARTICLEVII	<u>INCORPO</u>	<u>RATOR</u>		
The <u>name and ad</u>	-	·		•
Name:	Georg	e V Lopez III	····	:
Address:	1660	Royal Circle		: :
	Naple	s, FL 34112		
	-	· · · · · · · · · · · · · · · · · · ·		: IN
ARTICLE VIII	EFFECTI	YE DATE: Januar	v 1 2023	··
Effective date, if (If an effective d	other than tl ate is listed	the date must be specific and	ry 1, 2023 cannot be more than five days pri	တ or or 90 days after the
filing.)		,		• •
		his block does not meet the appl on the Department of State's red	icable statutory filing requirements, cords.	this date will not be listed as
certificate, I am fa			ocess for the above stated corporation egistered agent and agree to act in th	
	orge V Lope Exceptions	o (ii		December 29, 2022
Required Signatur	*s@ffairous re/Registered	Agent		Date
document to the L			in are true. I am aware that the fals efclony as provided for in s.817.155,	
Required Signar		↓ U!		December 29, 2022
Required Signata	#EFFECTION			Date