## P23000014131

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PICK-UP	WAIT	MAIL		
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(Bu	isiness Entity Nam	ne)		
(Do	cument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			

Office Use Only



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## PANTICJEWEL, CORP. 199 OCEAN LANE DRIVE, APT. #605 KEY BISCAYNE, FL 33149

October 30, 2017

Department of State DIVISION OF CORPORATIONS

Attention: New Filings Section

Dear Sir:

This is to advise you that the owner of PANTICJEWEL CORP. Document No. P18000043774 is the same owner of the attached Articles of Incorporation. We have dissolved the company and have no intent of reopening it.

Thank you for your help in this matter.

Sincerely yours.

Svetlana Pantic President

## **COVER LETTER**

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

SUBJECT: PA	NTICJEWEL. CORP				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l a check for:		
	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certified Copy & Certificate of		
	Status ADDITIONAL COPY REQUIRE				
FROM:	SVETLANA PANTIC				
	Name	(Printed or typed)			
	199 OCEAN LANE DR.APT #	¢605			
		Address			
KEY BISCAYNE, FLORIDA 33149 City, State & Zip					
	(A)	Critical Co. Paris			
(786) 329-1734					
Daytime Telephone number					
panticjewel@gmail.com					
	E-mail address; (to be used		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)

Name and Title:  Name and Title:  Address  Name and Title:  Name and Title:  Address  Address:	he name of the corporat	ion shall be: PANTICJEWEL, CORF	)	
RTICLE II SHARES THE NUMBER OF Shares of stock is: ONE HUNDRED SHARES  RTICLE V INITIAL OFFICERS AND/OR DIRECTORS  Name and Title: SVETLANA PANTIC PDTS Name and Title: Address  KEY BISCAYNE, FL 33149  Name and Title: Name	OCEAN LANE DRIV	Principal street address	199 OCEAN LANE DRIVE APT #605	
Name and Title: Name and Title			D ALL LAWFUL BUSINESS	· ·
TICLE V INITIAL OFFICERS AND/OR DIRECTORS  Name and Title: SVETLANA PANTIC PDTS Name and Title:  Address 199 OCEAN LANE DR. APT. #605 Address:  KEY BISCAYNE, FL 33149  Name and Title: Name and Title: Address: Name and Title: Name and Titl				
Name and Title: SVETLANA PANTIC PDTS Name and Title:  Address 199 OCEAN LANE DR. APT. #605 Address:  KEY BISCAYNE, FL 33149  Name and Title:  Address Address:  Name and Title:				-
Name and Title:  Address  Name and Title:  Address:  Name and Title:  Name and Title:  Name and Title:			Name and Title:	•
Name and Title:  Address  Name and Title:  Name and Title:  Name and Title:  Name and Title:	Address	199 OCEAN LANE DR. APT. #605	Address:	
Address:  Address:  Name and Title:  Name and Title:		KEY BISCAYNE, FL 33149	<u></u>	•
Name and Title: Name and Title:	Name and Title:		Name and Title:	
Name and Title: Name and Title:	Address			
Address: Address:	Name and Title:		Name and Title:	
	Address		Address:	_

Name	and Title:	Name and Title;	
Address		Address:	
		· ·	
	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	SVETLANA PANTIC		
Address:	199 OCEAN LANE DR.APT. #605	_	
	KEY BISCAYNE, FLORIDA 33149		
ARTICLE VII	<u>Incorporator</u>		
	<del></del>		p 44
The <u>name and</u>	address of the Incorporator is:		,
Name:	SVETLANA PANTIC		
Address:	199 OCEAN LANE DRIVE APT#605		
	KEY BISCAYNE, FL 33149		
			·
<u>ARTICLE VII</u>	<u> I EFFECTIVE DATE:</u>		••`
	if other than the date of filing: 02/01/2023		00 1 6 4.
filing.)	e date is listed, the date must be specific and canno	t be more than live days prior	or 90 days after the
	ate inserted in this block does not meet the applicable s effective date on the Department of State's records.	statutory filing requirements, thi.	s date will not be listed as
	amed as registered agent to accept service of process for familiar with and accept the appointment as register		
			02/01/2023
	Required Signature/Registered Agent		Date
	locument and affirm that the facts stated herein are		
document to th	ne Department of State constitutes a third degree felong	e as provided for in s.817.155, F.S	S.
<u></u>			02/01/2023
Required Signs	ature/Incorporator	Date	

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