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Division of Corporations

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Help

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**Division of Corporations** 

**Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

## (((H230001181683)))



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Divisi	on of Co	orporation	S
Fax Nu	mber	: (850)6	17-6381

From:

To:

Account Name	:	CORPORATE CREATIONS	INTERNATIONAL	INC.
Account Number	;	110432003053		
Phone	:	(561)694-8107		
Fax Number	:	(561)214-8442		

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

Email Address:\_\_\_

JDI Ventures Ho	lding, Inc.	
Certificate of Status	]	
Certified Copy	0	29 55 55
Page Count	04	
Estimated Charge	\$78.75	

Electronic Filing Menu Corporate Filing Menu

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### **COVER LETTER**

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

# SUBJECT: \_\_\_\_\_\_\_JDI VENTURES HOLDING, 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 Filing Fee

\$78.75
Filing Fee
& Certificate of Status

□ \$78.75	□ \$87.50
Filing Fee	Filing Fee.
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL CO	PY REQUIRED

FROM:	John Yearty		
	Name (Printed or typed)		
	3023 N Shannon Lakes Dr, Suite 102		
<b>-</b>	Address	//	
	Tallahassee, FL 32309	23	· · · · ·
	City, State & Zip	23 MAR	
	850-668-9518	29 23	
	Daytime Telephone number		:
	jyearty@peakps.com		
	E-mail address: (to be used for future annual report notification	on)	• • •

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

. . .

Address

#### → 18506176381

#### ARTICLES OF INCORPORATION

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

<u>ICLEII PRINC</u>	<u>IPAL OFFICE</u> Principal <u>street</u> address		Mailing address, if different is:
3023 N Shannon La	kes Dr, Ste 102		
Tallahassee, FL 323	09		
ICLE III PURPC purpose for which the	SE any la	wful activity that the M	embers deem appropriate.
number of shares of s ICLE V INITIA	<u>.S</u> 300 tock is:	<u><u> </u></u>	
number of shares of s I <u>CLE V INITIA</u> Name and Title	<u>S</u> 300 dock is: <u>LOFFICERS AND/OR DIRECTOR</u> John Yearty, President 3023 N Shannon Lakes Dr	Name and Title	
ICLE V INITIA	ES 300 stock is: LOFFICERS AND/OR DIRECTOR John Yearty, President 3023 N Shannon Lakes Dr STE 102	<u>S</u> Name and Title Address:	James Yearty, Chief Executive Officer
number of shares of s I <u>CLE V INITIA</u> Name and Title	IS 300 stock is: LOFFICERS AND/OR DIRECTOR John Yearty, President 3023 N Shannon Lakes Dr	<u>S</u> Name and Title Address:	James Yearty, Chief Executive Officer 3023 N Shannon Lakes Dr
umber of shares of s CLE V INITIA Name and Title Address	S   300     stock is:	<b><u>S</u></b> <u>Address:</u>	James Yearty, Chief Executive Officer 3023 N Shannon Lakes Dr STE 102 Tallahassee, FL 32309
number of shares of s I <u>CLE V INITIA</u> Name and Title Address	ES 300 stock is: LOFFICERS AND/OR DIRECTOR John Yearty, President 3023 N Shannon Lakes Dr STE 102	S Name and Title Address: Name and Title	James Yearty, Chief Executive Officer 3023 N Shannon Lakes Dr STE 102 Tallahassee, FL 32309

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

\_

\_\_\_\_\_

\_\_\_\_\_ Address;

\_\_\_\_\_

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	ind Title:	Name and Title:	·····
Addre	\$\$	Address:	
	<u> </u>		
ARTICLE VI	<u>REGISTERED AGENT</u>		

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name:	James Yearty	
Address:	3023 N Shannon Lakes Dr. Ste 102	
	Tallahassee, FL 32309	

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Address:

John Yearty 3023 N Shannon Lakes Dr. Ste 102 Tallahassee, FL 32309

#### ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: \_\_\_\_

\_\_\_\_\_. (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 designdred in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacin Required Signature/Registered Agent 171 Date 117 ÷, I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 4 Required Signature/Incorporator Date