

P23000023756
Florida Department of State
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.

((H23000119411 3)))



H230001194113ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : FRAMILEX LLC
Account Number : I20150000086
Phone : (786)469-9163
Fax Number : (305)848-3716

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

Email Address: _____

FILED
2023 MAR 30 PM 10:26
TALLAHASSEE, FL
STATE

**FLORIDA PROFIT/NON PROFIT CORPORATION
JOAN PHOTOGRAPHY INC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

2023 03 29 11:18:00

H230001194113

COVER LETTER

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

SUBJECT: JOAN PHOTOGRAPHY 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
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy,
& Certificate of
Status

ADDITIONAL COPY REQUIRED.

2023 MAR 30 PM 10:26

FILED

FROM: JOAN J. DELGADO OQUEENDO
Name (Printed or typed)

4721 NW 4th ST
Address

MIAMI, FL 33126
City, State & Zip

(305) 360-9872
Daytime Telephone number

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

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

H230001194113

H 23 000 1194 11 3

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

JOAN PHOTOGRAPHY INC

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4721 NW 4th ST

SAME ADDRESS

MIAMI, FL 33126

ARTICLE III PURPOSE

ANY AND ALL LAWFUL BUSINESS

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

100

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOAN J. DELGADO OQUEENDO, P Name and Title:

Address 4721 NW 4th ST Address:

MIAMI, FL 33126

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

FILED 2023 MAR 30 PM 10:27 HILLSBORO COUNTY OF STATE FLORIDA HILLSBORO, FL

H 23 000 1194 11 3

423000119411 3

Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____
	_____		_____
	_____		_____

ARTICLE VI REGISTERED AGENT

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

Name: JOAN J. DELGADO OQUENDO

Address: 4721 NW 4th ST
MIAMI, FL 33126

FILED
 2023 MAR 30 PM 10:27
 DEPARTMENT OF STATE
 TALLAHASSEE, FL

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOAN J. DELGADO OQUENDO

Address: 4721 NW 4th ST
MIAMI, FL 33126


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 03/29/2023 (OPTIONAL)


(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business 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 designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

 _____ Required Signature Registered Agent	<u>03/29/2023</u> _____ 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.

 _____ Required Signature Incorporator	<u>03/29/2023</u> _____ Date
---	------------------------------------

423000119411 3