

P230000 70062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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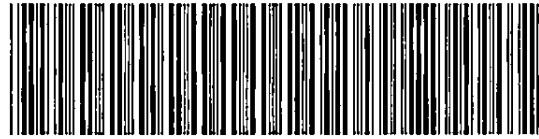
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FLORIDA DEPARTMENT OF BANKING AND FINANCE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

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

SUBJECT: J & Y Export & Import 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

FROM: Justin Ybarrá  
Name (Printed or typed)

1040 21st St SW  
Address

Alaples FL 32117  
City, State & Zip

229-454-8221  
Daytime Telephone number

crystalynn826@gmail.com  
E-mail address: (to be used for future annual report 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)

ARTICLE I NAME

The name of the corporation shall be:

Ybarr Import + Export Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1040 21st St SW  
Naples FL 34117

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Rehab projects, shipping  
Building supplies and

ARTICLE IV SHARES

The number of shares of stock is:

10,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

CEO Justin Ybarr

Name and Title:

Address

1040 21st St SW

Address:

Naples FL 34117

Name and Title:

Crystal Ybarr

Name and Title:

Address

1040 21st St SW

Address:

Naples FL 34117

Name and Title:

Vice pres Ana Toledo

Name and Title:

Address

1040 21st St SW

Address:

Naples FL 34117

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CLERK OF DISTRICT COURT  
NAPLES, FLORIDA

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: Angie Toledo

Address: 2384 50th Terr SW  
Naples FL 34116

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: James R Newton

Address: 1040 24th St SW  
Naples FL 34117

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: sep 29th 2023 (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 designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Angie Toledo  
Required Signature/Registered Agent

9-29-2023  
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.

James R Newton  
Required Signature/Incorporator

9-29-2023  
Date