## P230000 75899

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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## **COVER LETTER**

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

SUBJECT: NJ BE	HAVIOR CORP				
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an ori	ginal and one (1) copy of the a	ticles of incorporation and	l a check for:		
	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy			
	ADDITIONAL COPY REC				
FROM: _	IARIA E RUIZ Nan	ne (Printed or typed)			
7	750 SW 117TH STREET SUITE 20				
M	IAMEFLORIDA 33183	Address			
	City. State & Zip				
30	5 595-2407				
	Daytime	Telephone number			
Mz	ARIAQUIROS9@HOTMAIL.COM				
	E-mail address; (to be use	ed for future annual report i	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)

TICLE II PRINCIPAL OFFICE Principal street address 41 SW 117 COURT		Mailing address, if different is:	
AMI FLORIDA			
FICLE III PUR purpose for whic	POSE h the corporation is organized is: ANY		
·· · · · · · · · · · · · · · · · · · ·			
<del></del>			
- · - <del>-</del>			
	RES of stock is: 100		
FICLE IV SHA number of shares			202
TICLE IV SHA	RES of stock is: 100 TAL OFFICERS AND/OR DIRECTOR	<u>ks</u>	2023 OC
TICLE IV SHA	RES of stock is: 100  CAL OFFICERS AND/OR DIRECTOR (de: LINA GAVIRIA, PRES	<u>ks</u>	ZOZ3 OCT I
TICLE IV SHA number of shares TICLE V INIT	RES of stock is: 100  CAL OFFICERS AND/OR DIRECTOR (de: LINA GAVIRIA, PRES	&S Name and Title	ZOZJOCT 10 P
TICLE IV SHA number of shares TICLE V INIT	RES of stock is: 100  LAL OFFICERS AND/OR DIRECTOR (tle: LINA GAVIRIA, PRES 3241 SW 117 COURT	&S Name and Title Address:	5 T D
TICLE IV SHA number of shares TICLE V INIT Name and T Address	RES of stock is: 100  CLAL OFFICERS AND/OR DIRECTOR ide: LINA GAVIRIA, PRES 3241 SW 117 COURT MIAMI FLORIDA 33175	<u>&amp;S</u> Name and Title Address:	10 PH 1310
number of shares  FICLE V INIT  Name and T  Address  Name and Tit	RES of stock is: 100  CAL OFFICERS AND/OR DIRECTOR ttle: LINA GAVIRIA, PRES 3241 SW 117 COURT MIAMI FLORIDA 33175	Name and Title	SEE
number of shares  FICLE V INIT  Name and T  Address	RES of stock is: 100  CAL OFFICERS AND/OR DIRECTOR ttle: LINA GAVIRIA, PRES 3241 SW 117 COURT MIAMI FLORIDA 33175	Name and Title	10 PH 1310
number of shares  FICLE V INIT  Name and T  Address  Name and Tit	RES of stock is: 100  CAL OFFICERS AND/OR DIRECTOR ttle: LINA GAVIRIA, PRES 3241 SW 117 COURT MIAMI FLORIDA 33175	Name and Title	SEE
number of shares  FICLE V INIT  Name and T  Address  Name and Tit  Address	RES of stock is: 100  CLAL OFFICERS AND/OR DIRECTOR itle: LINA GAVIRIA, PRES 3241 SW 117 COURT MIAMI FLORIDA 33175	Name and Title Address:  Name and Title Address:  Address:	SSIE 1110
number of shares  FICLE V INIT  Name and T  Address  Name and Tit  Address	RES of stock is: 100  CAL OFFICERS AND/OR DIRECTOR ttle: LINA GAVIRIA, PRES 3241 SW 117 COURT MIAMI FLORIDA 33175	Name and Title Address:  Name and Title Address:  Name and Title Address:  Name and Title	SSIE 1110

Name ar	id Title:	Name and Title:	
Addres	s	Address:	
	REGISTERED AGENT Torida street address (P.O. Box NOT accept	table) of the registered agent is:	
Name:	LINA GAVIRIA		
Address:	3241 SW 117 COURT		
	MIAMI FLORIDA 33175		
<u>ARTICLE VII</u>	INCORPORATOR		
The <u>name and a</u>	ddress of the Incorporator is:		
Name:	LINA GAVIRIA		
Address:	3241 SW 117 COURT		
	MIAMI FLORIDA 33175		
Effective date, if	EFFECTIVE DATE: Other than the date of filing: 09/21/2023 date is listed, the date must be specific and	. (OPTIO I cannot be more than five d	NAL) ays prior or 90 days after the
	e inserted in this block does not meet the apperfective date on the Department of State's r		ements, this date will not be listed as
Having been nan certificate, I am j	nod us registered agent to accept service of pi familiar with and accept the appointment as	rocess for the above stated corp registered agent and agree to a	oration at the place designated in the
V	ma/ Jour		09/09/2023
<del></del>	Required Signature/Registered Age	ent	Date
	current and affirm that the facts stated her Department of State constitutes a third degre		
/	lina		09/09/2023
Required Signate	re/Incorporator		Date

## P230000 75899

September 9, 2023

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

Re: NJBEHAVIOR CORP

To whom it may concern:

By means of this letter I am advising that I have no intentions of re-instating the above mentioned dissolved corporation.

Should you have any questions or concerns please do not hesitate to contact me.

Sincerely,

LINA GAVIRIA

CARLOS RUIZ

Notary Public-State of Florida

Commission # HH 74168

My Commission Expires

December 21, 2024