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.

(((H240001161203)))



H240001161203ABCR

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 : HUBCO

Account Number : 104662003400 Phone : (516)813-1184

Fax Number : (516)935-3088

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

Email Address: _____lfcpapc@gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION J ART DECO FL INC.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

H24000116120

ARTICLES OF INCORPORATION

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

	tion shall be: JA	J ART DECO FL INC.	
ARTICLE II PRINC		Mailin	g address, if different is:
OTICI E III DISDO	OSE the corporation is organized is: Windov		treatment design
	ES stock is: 1,500 at No Par Value AL OFFICERS AND/OR DIRECTORS JAROSLAW GAWKOWSK	Name and Title:	
RTICLE V INITIA	JAROSLAW GAWKOWSK	Name and Title: Address:	
RTICLE V INITIA Name and Title:	JAROSLAW GAWKOWSK President/Director	_ tvanic and true	
Name and Title: Address	JAROSLAW GAWKOWSK President/Director 7301 BIRCHMORE STREET	Address:	
Name and Title: Address	JAROSLAW GAWKOWSK President/Director 7301 BIRCHMORE STREET NAPLES, FL 34109	Address: Name and Title: Address:	
Name and Title: Address Name and Title: Address	JAROSLAW GAWKOWSK President/Director 7301 BIRCHMORE STREET NAPLES, FL 34109	Address: Name and Title: Address:	2624 1 25
Name and Title: Address Name and Title: Address	JAROSLAW GAWKOWSK President/Director 7301 BIRCHMORE STREET NAPLES, FL 34109	Address: Name and Title: Address:	2624 11 25

H24000116120

Name an	d Title:	Name and Title:
Address		Address:
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	JAROSLAW GAWKOWSKI	
Address:	7301 BIRCHMORE STREET	
	NAPLES, FL 34109	- -
ARTICLE VII	<u>INCORPORATOR</u>	
The name and ac	idness of the Incorporator is:	
Name:	JAROSLAW GAWKOWSKI	
Address:	7301 BIRCHMORE STREET	_
	NAPLES, FL 34109	-
ARTICLE VIII	EFFECTIVE DATE:	
Effective date, if (If an effective d filing.)	other than the date of filing: ate is listed, the date must be specific and cannot	t be more than five days prior or 90 days after the
	inserted in this block does not meet the applicable flective date on the Department of State's records.	statutory filing requirements, this date will not be listed as
	ned as registered agent to accept service of process fo amiliar with and accept the appointment as register	or the above stated corporation at the place designated in this ed agent and agree to act in this capacity
\mathcal{A}	<u>~</u>	March 15 2024
Required Signatur	re/Registered Agent JAROSLAW GAWKOW	/SKI Date_f.
I submit this doc		true. I am aware that the false information submitted in a
	An	March 15, 2024
Required Signatu	re/Incorporator JAROSLAW GAWKOWS	C) Date
		