

P 240004922

Florida Department of
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.

((H24000258425 3)))



H240002584253ABC%

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 : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : 120000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
YCJ CORP**

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

Electronic Filing Menu

Corporate Filing Menu

Help

RECEIVED

2024 JUL 31 PM 4:24

FLORIDA
DIVISION OF
CORPORATIONS

STATE
JUL 31 2024

FILED

T.J.H
8/31
8/1/24

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:YCT Corp**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

1320 w 3rd ave, Hialeah, FL
33010**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Joeluis Curbelo Jimenez (P)

STATE**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Joeluis Curbelo Jimenez
1320 w 3rd ave Hialeah FL
33010**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Joeluis Curbelo Jimenez
1320 w 3rd ave Hialeah FL
33010

FILED

Required Signatures:

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

[Signature]
Registered Agent _____ 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.

[Signature]
Incorporator _____ Date _____

FILED
JUL 31 2013
STATE