00006634 Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Account Number : I20040000031 Phone : (800)906-9220

: (800)906-9880 Fax Number

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

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FLORIDA PROFIT/NON PROFIT CORPORATION Jessica R. Teich Inc.

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Electronic Filing Menu Corporate Filing Menu

Help



ICLE I NAME name of the corpora	tion shall be: Jessica R. Teich, Inc.			
TCLE II PRINC	JPAL OFFICE			
l-Village Blvd #301	Principal <u>street</u> address	Mailing address, if different is: 2811 Village Blvd #302		
st Palm Beach FL 3.	3409	Wes	t Palm Beach	FL 33409
		-	<u>-</u>	
FICLE III PURPO purpose for which t	DSE he corporation is organized is:	age in any lawful a	et or activity fe	η ι
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number of shares of	STOCK IS			(A) - (A)
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			 Title:	11 1:27
Name and Title	Jessica Teich- President	Name and	Title:	11 1:27
Name and Title		Name and Address:	Title:	11 1: 27
Name and Title	Jessica Teich- President 2811 Village Blvd #302 West Palm Beach FL 33409	Name and Address:		7
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Addres	· · · · · · · · · · · · · · · · · · ·		
		<del></del>	<del></del>
	<u>REGISTERED AGENT</u> Floridu <u>street address</u> (P.O. Box NOT accepta	able) of the registered agent is:	
_	Jessica Teich		
Name:	·····		
Addr <b>e</b> ss	2811 Village Blvd #302	<u> </u>	
<u>Not ::</u>	West Palm Beach FL 33409	1.3	
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. D.W. (*) 1: 1/11	INVESTIGATION OF THE PROPERTY		
ARTICI,E PH	INCORPORATOR	·	
The <u>name and a</u>	address of the Incorporator is		
Name:	Jessica Teich		
	2811 Village Blvd #302	<del></del>	PH 4: 27
Address:		· ·	
	West Palm Beach FL 33409	<del></del>	
ARTICLE VIII	EFFECTIVE DATE:		
iffective date, i	of other than the date of filing:	. (OPTIONA	L) less days prior or 90 business
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llaving been no	amed as registered agent to accept service of p	process for the above stated corp-	oration at the place designated in
his certificate.	I am familiar with and accept the appointmen	t as registered agent and agree to	act in this capacity
	FM.		10/7/24
- ;	Required Signature Registered Age	ent	Date
l cubmit this di	j ocument and affirm that the facts stated here	in are true. I om aware that the	false information submitted in a
locument to the	Department of State constitutes a third degre	e felony as provided for in s.817.	155, F.S.
Regi	uricd Signature/Incorporator		10/7/24 Date
i veqi	in a communication of the comm		