

TRANSMITTAL LETTER
P99 000 100357

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

800003042438--8
-11/12/99-01032-018
*****78.75 *****78.75

SUBJECT: JPBC Inc.
(Proposed corporate name - must include suffix)

Enclosed is 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: JEFF POWELL
Name (Printed or typed)
6620 INDIAN CREEK DR., #408
Address
MIAMI BEACH, FL 33139 33141
City, State & Zip
(305) 968-3302
Daytime Telephone number

FILED
99 NOV 12 PM 2:06
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NOTE: Please provide the original and one copy of the articles.

S. Thompson NOV 16 1999

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

JPBC INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

6620 INDIAN CREEK DR., #408.
MIAMI BEACH, FL 33141

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS


The name and Florida street address of the initial registered agent are:

JOHN SIDERIS
710 WASHINGTON AVE, #504
MIAMI BEACH, FL 33139

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

JEFF POWELL
6620 INDIAN CREEK DR., #408
MIAMI BEACH, FL 33141


Signature/Incorporator

11/2/99
Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent


Signature/Registered Agent

11/02/99
Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA