

P20000008046

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

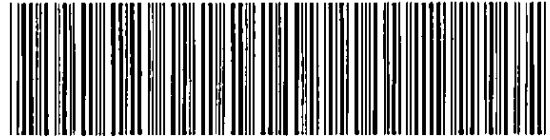
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200340006852

FILED  
2020 JAN 30 PM 3:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

20 JAN 30 PM 4:47

JAN 31 2020  
K Brumbley

**Sunshine State Corporate Compliance Company**

3458 Lakeshore Drive, Tallahassee, Florida 32312  
(850) 656-4724

DATE 1/30/2020

**\*\*WALK IN\*\***

ENTITY NAME BJWT HEMP INCORPORATED

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXXX

*Plain Copy*

*Certified Copy*

*Certificate of Status*

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

*Certified Copy of Arts & Amendments*

*Certificate of Good Standing*

**\*\*APOSTILLE' / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED 70.00

ACCOUNT #: I20160000072

*S R JH*

*Please call Tina at the above number for any issues or concerns. Thank you so much!*

## COVER LETTER

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

**SUBJECT:** BJWT Hemp Incorporated  
**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

Enclosed are 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** ZenBusiness PBC  
Name (Printed or typed)

702 San Antonio St., 4th Floor  
Address

Austin, TX 78701  
City, State & Zip

844-493-6249  
Daytime Telephone number

fulfillment@zenbusiness.com  
E-mail address: (to be used for future annual report 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)

**ARTICLE I NAME**

The name of the corporation shall be: BJWT Hemp Incorporated

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
1100 Biscayne Boulevard, #3705  
Miami, FL 33130

Mailing address, if different is:  
1100 Biscayne Boulevard, #3705  
Miami, FL 33130

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Pet Hemp Products

**ARTICLE IV SHARES**

The number of shares of stock is: 100000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Seth Allan Semilof, Director, President, Treasurer

Address 1100 Biscayne Boulevard, #3705  
Miami, FL 33130

Name and Title: Black Jaguar White Tiger Foundation, Director

Address: 21021 Ventura Blvd Suite #340  
Woodland Hills, CA 91364

Name and Title: Eduardo Serio, Vice President, Secretary

Address 21021 Ventura Blvd Suite #340  
Woodland Hills, CA 91364

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

2020 JUN 30 PM 3:24  
SECRET  
TALLMANSVILLE, PENNSYLVANIA

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Registered Agents Inc.  
 Address: 7901 4th St N, STE 300  
St. Petersburg, FL 33702

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Seth Allan Semilof  
 Address: 1100 Biscayne Boulevard, #3705  
Miami, FL 33130

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
 (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

/s/ Bill Havre c/o Registered Agents Inc. 01/22/2020  
 Required 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.*

/s/ Seth Allan Semilof 01/22/2020  
 Required Signature/Incorporator Date