



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 8, 2014

VON JAY SPRECK
3370 NE 190TH ST #1104
AVENTURA, FL 33180

Subject: **VON JAY SPRECK**

REGISTRATION NUMBER: **G14000101687**

This will acknowledge the filing of the above fictitious name registration which was registered on October 7, 2014. This registration gives no rights to ownership of the name.

Each fictitious name registration must be renewed every five years between January 1 and December 31 of the expiration year to maintain registration. Three months prior to the expiration date a statement of renewal will be mailed.

If the mailing address of this business changes, please notify this office in writing, or through the link provided on our website www.sunbiz.org for Address & FEI/EIN Changes. Please reference the original registration number.

Enclosed is your certificate(s) as requested.

Should you have any questions regarding this matter you may contact our office at (850) 245-6058.

Lewis S Berger
Reinstatement Section
Division of Corporations

Letter No. 214A00021535

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

State of Florida



Department of State

I certify that the attached is a true and correct copy of the Application For Registration of Fictitious Name of VON JAY SPRECK, registered with the Department of State on October 7, 2014, as shown by the records of this office.

The Registration Number of this Fictitious Name is G14000101687.

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Eighth day of October, 2014



CR2EO22 (1-11)

Ken Detzner

Ken Detzner
Secretary of State

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

Note: Acknowledgements/certificates will be sent to the address in Section 1 only.

Section 1

1. VON JAY SPRECK
Fictitious Name to be Registered (see instructions if name includes "Corp" or "Inc")
C/O 3370 NE 190th ST
1104
Mailing Address of Business
City AVENTURA, FLORIDA State FL Zip Code 33180
3. Florida County of principal place of business: 33180
"MULTIPLE"
(see instructions if more than one county)
FEI Number #327642293

FILED
2014 OCT -7 AM 11:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/07/14 - 11:15 - 015

This space for office use only

Section 2

A. Owner(s) of Fictitious Name If Individual(s): (Use an attachment if necessary):

1. Von Spreck Jay 2. _____
Last First M.I.
C/O 3370 NE 190th ST apt
Address
#1104
City AVENTURA State FLORIDA Code 33180 City State Zip Code

B. Owner(s) of Fictitious Name If other than an individual: (Use attachment if necessary):

1. Entity Name _____ Address _____ City State Zip Code Florida Document Number _____ FEI Number: _____
 Applied for Not Applicable

2. Entity Name _____ Address _____ City State Zip Code Florida Document Number _____ FEI Number: _____
 Applied for Not Applicable

Section 3

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. In accordance with Section 895.09, F.S., I further certify that the fictitious name to be registered has been advertised at least once in a newspaper as defined in chapter 50, Florida Statutes, in the county where the principal place of business is located. I understand that the signature below shall have the same legal effect as if made under oath and I am aware that 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 of Owner [Signature] Date 9/24/14 E-mail address: (to be used for future renewal notification) _____
Phone Number: 305 527-1018

Section 4

FOR CANCELLATION COMPLETE SECTION 4 ONLY:
FOR FICTITIOUS NAME OR OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4:

I (we) the undersigned, hereby cancel the fictitious name _____
_____, which was registered on _____ and was assigned
registration number _____

Signature of Owner _____ Date _____ Signature of Owner _____ Date _____

Mark the applicable boxes Certificate of Status -- \$10 Certified Copy -- \$30
NON-REFUNDABLE PROCESSING FEE: \$50



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 8, 2014

JAY VON SPRECK
3370 NE 190TH STREET #1104
AVENTURA, FL 33180

Subject: **JAY VON SPRECK**

REGISTRATION NUMBER: **G14000101688**

This will acknowledge the filing of the above fictitious name registration which was registered on October 7, 2014. This registration gives no rights to ownership of the name.

Each fictitious name registration must be renewed every five years between January 1 and December 31 of the expiration year to maintain registration. Three months prior to the expiration date a statement of renewal will be mailed.

If the mailing address of this business changes, please notify this office in writing, or through the link provided on our website www.sunbiz.org for Address & FEI/EIN Changes. Please reference the original registration number.

Enclosed is your certificate(s) as requested.

Should you have any questions regarding this matter you may contact our office at (850) 245-6058.

Lewis S Berger
Reinstatement Section
Division of Corporations

Letter No. 314A00021493

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

State of Florida



Department of State

I certify that the attached is a true and correct copy of the Application For Registration of Fictitious Name of JAY VON SPRECK, registered with the Department of State on October 7, 2014, as shown by the records of this office.

The Registration Number of this Fictitious Name is G14000101688.

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Eighth day of October, 2014



CR2EQ22 (1-11)

Ken Detzner

Ken Detzner
Secretary of State

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

Note: Acknowledgements/certificates will be sent to the address in Section 1 only.

FILED

2014 OCT -7 AM 11:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

614000101636
10/07/14--01019--016 #=20.00

Section 1

1. JAY VONSPRECK
Fictitious Name to be Registered (see instructions if name includes "Corp" or "Inc")

C/O 3370 NE 190th STREET
#1104
Mailing Address of Business

AVENTURA, Florida 33180
City State Zip Code

3. Florida County of principal place of business: _____
"MULTIPLE"
(see instructions if more than one county)

FEI Number: #327642295

This space for office use only

Section 2

A. Owner(s) of Fictitious Name If Individual(s): (Use an attachment if necessary):

1. VonSpreck, JAY 2. _____
Last First M.I. Last First M.I.

C/O 3370 NE 190th STREET Address _____
#1104 Address _____
City AVENTURA State Florida Code 33180 City State Zip Code

B. Owner(s) of Fictitious Name If other than an individual: (Use attachment if necessary):

1. _____ 2. _____
Entity Name Entity Name
Address Address
City State Zip Code City State Zip Code
Florida Document Number _____ Florida Document Number _____
FEI Number: _____ FEI Number: _____
 Applied for Not Applicable Applied for Not Applicable

Section 3

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. In accordance with Section 855.09, F.S., I further certify that the fictitious name to be registered has been advertised at least once in a newspaper as defined in chapter 50, Florida Statutes, in the county where the principal place of business is located. I understand that the signature below shall have the same legal effect as if made under oath and I am aware that 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] 9/24/14
Signature of Owner Date

JAYVONSPRECK@gmail.com
E-mail address: (to be used for future renewal notification)

Phone Number: 305 527-1018

Section 4

FOR CANCELLATION COMPLETE SECTION 4 ONLY:
FOR FICTITIOUS NAME OR OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4:

I (we) the undersigned, hereby cancel the fictitious name _____
_____, which was registered on _____ and was assigned
registration number _____

Signature of Owner Date Signature of Owner Date

Mark the applicable boxes Certificate of Status -- \$10 Certified Copy -- \$30

NON-REFUNDABLE PROCESSING FEE: \$50

CR4E001 (9/1/13)

South Florida Sun

Office (954) 458-0635 • Fax (954) 458-0635

MISCELLANEOUS

This matter is to be part of public record, the living soul and sovereign being who goes by the name of Jay VonSpreck declares absolute exclusive commercial & intellectual proprietary rights to the fictitious all caps name **JAY VONSPRECK & VON JAY SPRECK** all rights reserved.

Place your ad in The South Florida Sun Times Classified (954) 458-0635. The deadline to place your ad is next Tuesday at 5pm.

HELP WANTED

LIC. HAIRSTYLIST/Barber/Natural Hair Care Specialist Or Braider Needed. Booth or comm, haircutting skills & following req. (954) 997-8258

LICENSED MANICURIST For busy salon in Skylake. 1736 NE Miami Gardens Drive. Great Opportunity. (305) 949-4520

HOUSE FOR RENT

A KEY WEST STYLE Furnished House Trees, flowers, hurricane shutters, close to Gulfstream Race-track & Casino, rests, stores, mins to bch, 3 mo min, \$950+ UT. **GARDEN COTTAGE** 1 Br, \$750 mo + UT. (954) 458-1700

APARTMENT TO RENT

HALLANDALE 1/1 apartment, full kitchen and bath, \$600/mo., electric & water included. **CALL GEORGE:** (561) 307-1664

SERVICE DIRECTORY

Chickee Huts



NEW & REPAIR
954.497.1122
State Certified Thatching Contractor C1000002

SERVICE DIRECTORY

HANDYMAN

Small Job Specialist! Repair Kitchen And Bathrooms Licensed & Insured **CALL DAVID** (954) 966-7593

Lic. & Ins. **FREE ESTIMATES** ACCURATE,

APARTMENT TO RENT

CONDO RENTAL 5950 Collins Ave. #706 Miami Bch, FL 33140 \$30K-\$60K per month. **CONTACT:** (615) 254-7242

HEMISPHERES HALLANDALE

On Ocean, fully renovated 3 Bed/3 Bath, minimum 4 months. Avail. immediately. (416) 315-1995

HEMISPHERES Seasonal Rentals

ON 22F 2/2, unfurn, \$2,000 mo., yearly. ON mid fl, 1/1.5, furn, \$2,800 mo., seasonal. BS 18G 2/2, remod, South vu, \$3,500 mo. HalprinRealty.com (954) 817-4010

HOLLYWOOD LAKES

Updated furnished, 2/1.5 condo, 55+ building. Quiet, 24 unit complex with pool. Near beach & golf. \$1200 month. Monarch Properties B. MARKS, RLTR (954) 398-1047

IMPERIAL TOWERS

1/1.5, furn, nice view. **HEMISPHERES Seasonal Rentals** BN Studio. Pepe & Martha Pena (954) 734-7274 (305) 261-1945 oceandreamersalty.com

HELP WANTED

HAIRDRESSERS AND NAIL TECHS

With following, needed Salon located in Danis

(754) 224-6732 (954) 925-7614

APARTMENT FOR SALE

ANCHOR B. Hallandale Bch 2/2 split, water 1 24 hr sec., valet, W/D in apt. Pet D: (954) 929-1 E: (954) 456-6

HALLANDA

Meadowbrook C 1/1 plus terrac Priced at: \$95, Leslie Abeli Beachfront Pt (954) 303-51

HEMISPHE

BN 16A, Stud North view, \$16 BS hi-fl, 1/1.5, S oramic view, C Klein decorat ON 11E 3/2.5, SE/SW views, ted SS applia ON 20M, 1/1.5, u ded wtr vus, \$2 OS mid fl, N v updated, mid \$ OS 21G South 2/2, furn, high \$ HalprinRealt (954) 817-4

APARTM FOR SA

HOLLYWOOD

On The Ocea Lg 2/2, \$259K & Intra vus, ooc near Trump T Beachfront F Gomcz: (905) 3 (954) 850-