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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: T. P. JACKETTS 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: JACK RICKETTS
Name (Printed or typed)

455 TROUT RIVER DR
Address

JACKSONVILLE FL 32208
City, State & Zip

(904) 608-5014
Daytime Telephone number

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: T. P. JACKETTS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 45 W. Bay ST
Jacksonville FL 32202

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Beverage & Food Retail Sales

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Thomas P. Ricketts PRES.
Jack F. Ricketts Sect/TREASURER

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

JACK RICKETTS
45 W Bay ST
JACKSONVILLE FL 32202

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

JACK F. RICKETTS
455 TROUT River DR
JACKSONVILLE FL 32208

Having been named as registered agent to accept service of process for the above stated corporation at the place designa-
certificates, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Jack F. Ricketts JACK F. RICKETTS
Signature/Registered Agent

Sept 14, 2004
Date

Jack F. Ricketts JACK F. RICKETTS
Signature/Incorporator

Sept 14, 2004
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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