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(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Endty Name)				
. (Document Number)				
Certified Copies Certificates of Status				
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COVER LETTER

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

SUBJECT:	J. T. Tires SI (PROPOSED CORPOR	100 RATE NAME – <u>MUST INCLI</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the a	articles of incorporation and	a check for:
\$70.00 Filing Fee	Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	James Taylor Na	me (Printed or typed)	
	2929 Justina	Address	
	Jacksonulle, F	L 32277 tv, State & Zip	

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

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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:

J. T. Tires Shop Company

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is: Orc. Share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

ARTICLE VI REGISTERED AGENT

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

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

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

James Daylor	1-26-10
Signature/Registered Agent	Date
Jorges Try to	1-26-10
Signature/Ingorporator	Date