

P11000076958

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

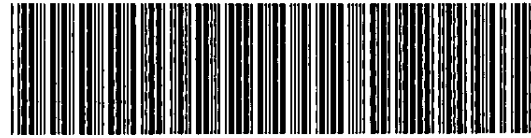
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11 AUG 29 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: J.E.M.P Corp.

(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

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: James A Nourse

Name (Printed or typed)

517 Madeira ave

Address

Miami Fl 33134

City, State & Zip

786-554-2758

Daytime Telephone number

noursebaron@hotmail.com ✓

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 AUG 29 PM 4:00

FILED

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



RECEIVED

11 AUG 29 PM 12:56

FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 8, 2011

JAMES A NOURSE
517 MADEIRA AVE
MIAMI, FL 33134

SUBJECT: J.E.M.P. CORP.
Ref. Number: W11000041366

We have received your document for J.E.M.P. CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 511A00018573

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.E.M.P Corp.~~ **Produgrand Corp.**

ARTICLE II PRINCIPAL OFFICE

Principal street address

517 madeira ave

Miami Florida 33134

Mailing address, if different is:

PRODUGRAND CORP.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is: **100 shares**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **James a Nourse**

Address: **517 Madeira ave**

Miami FL 33134

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

FILED
11 AUG 29 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: **James A Nourse**

Address: **517 Madeira ave**

Miami FL 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **James A Nourse**

Address: **517 Madeira ave**

Miami FL 33134

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

Required Signature/Registered Agent

7-28-2011

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.

Required Signature/Incorporator

7-28-2011

Date