

P 14000065431

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

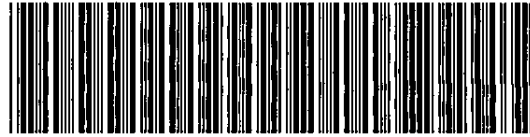
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
14 AUG -4 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

gf 8/4/14

COVER LETTER

ATX1

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

SUBJECT: JMATHIS CONSTRUCTION CO INC
(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: JOHN A. MATHIS
Name (Printed or typed)

1784 HOLLOW GLEN DR
Address

MIDDLEBURG, FL 32068
City, State & Zip

(904) ~~904~~ - 904-505-3452
Daytime Telephone number

JMATHIS CONSTRUCTION @ GMAIL.COM
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL 32304
14 AUG - 4 PM 3:00
FILED

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

JMATHIS CONSTRUCTION CO INC

ATX1

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be: JMATHIS CONSTRUCTION CO INC

14 AUG -4 PM 3:00

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

SECRETARY OF STATE
Mailing address, if different from the above, is: TALLAHASSEE, FLORIDA

1784 HOLLOW GLEN DR

MIDDLEBURG, FL 32068

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: FOR CONDUCTING TO THE EXTENT PERMITTED BY FLORIDA

LAW AND TO CARRY ON IN ANY CAPACITY ANY BUSINESS OR TRADE DEEMED LEGAL IN THE STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is: 100 COMMON \$1 PAR

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOHN A. MATHIS, PRESIDENT/DIRECTOR Name and Title: _____

Address: 1784 HOLLOW GLEN DR Address: _____

MIDDLEBURG, FL 32068 _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: JOHN A. MATHIS

Address: 1784 HOLLOW GLEN DR

MIDDLEBURG, FL 32068

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOHN A. MATHIS

Address: 1784 HOLLOW GLEN DR

MIDDLEBURG, FL 32068

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

John A. Mathis

Required Signature/Registered Agent

7-25-2014

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.

John A. Mathis

Required Signature/Incorporator

7-25-2014

Date

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14 AUG - 4 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA