

P95000062874

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870

Mailing Address: Post Office Box 10349, Tallahassee, FL 32302

TOLL FREE No. 1-800-342-8062

FAX (904) 222-1222

95 JUL -6 AM 10:29

RE: Jeffrey A. Shick, Inc

DIVISION OF REGISTRATION

NAME \_\_\_\_\_

FIRM \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
One Day Service \_\_\_\_\_ Two Day Service \_\_\_\_\_

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

	C.C. FEE.	DISBURSED
Capital Express™		
<input checked="" type="checkbox"/> Art. of Inc. File		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input checked="" type="checkbox"/> Foreign Corp. File		
<input type="checkbox"/> ( ) Cert. Copy(s)		
<input type="checkbox"/> Art. of Amend. File		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U S-		
<input type="checkbox"/> Fictitious Name File	4000001530634 -07/06/95--01018--017 ****122.50	122.50
<input type="checkbox"/> Name Reservation		
<input type="checkbox"/> Annual Report/Reinstatement		
<input type="checkbox"/> Reg. Agent Service		
<input type="checkbox"/> Document Filing		
<input type="checkbox"/> Corporate Kit		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving Record		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 File		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Retrieval		
<input type="checkbox"/> File No.'s, _____ Copies		
<input type="checkbox"/> Courier Service		
<input type="checkbox"/> Shipping/Handling		
<input type="checkbox"/> Phone ( )		
<input type="checkbox"/> Top Priority		
<input type="checkbox"/> Express Mail Prep.		
<input type="checkbox"/> FAX ( ) pgs.		

SUBTOTALS

FEE.....	
DISBURSED.....	
SURCHARGE.....	
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

Please remit invoice number with payment  
TERMS: NET 10 DAYS FROM INVOICE DATE  
1 1/2% per month on Past Due Amounts  
Past 30 Days, 18% per Annum.

THANK YOU  
from  
Your Capital Connection

DMC  
8-15 95

1095-13595

dB 7/6/95

REQUEST TAKEN CONFIRMED APPROVED

DATE \_\_\_\_\_

TIME \_\_\_\_\_ CK No. \_\_\_\_\_

BY RLH \_\_\_\_\_

WALK-IN  
Will Pick Up 7:16 12pm

# CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870

Mailing Address: Post Office Box 10349, Tallahassee, FL 32302

TOLL FREE No. 1-800-342-8062

FAX (904) 222-1222

NAME \_\_\_\_\_

FIRM \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

795-62874

RE: Jeffrey A. Shirk, Inc.

	C.C. FEE.	DISBURSED
<input type="checkbox"/> Capital Express™		
<input checked="" type="checkbox"/> Art. of Inc. File		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input type="checkbox"/> Foreign Corp. File		
<input checked="" type="checkbox"/> ( ) Cert. Copy(s)		
<input type="checkbox"/> Art. of Amend. File		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U S.		
<input type="checkbox"/> Fictitious Name File		
<input type="checkbox"/> Name Reservation		
<input type="checkbox"/> Annual Report/Reinstatement		
<input type="checkbox"/> Reg. Agent Service		
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<input type="checkbox"/> Phone ( )		
<input type="checkbox"/> Top Priority		
<input type="checkbox"/> Express Mail Prep.		
<input type="checkbox"/> FAX ( ) pgs.		
<b>SUBTOTALS</b>		

RECEIVED  
95 AUG 15 10 11 17  
DIVISION OF CORPORATION

REQUEST TAKEN CONFIRMED APPROVED  
DATE \_\_\_\_\_  
TIME \_\_\_\_\_ CK No. \_\_\_\_\_  
BY AAK

WALK-IN Will Pick Up 8-15-1200

FEE.....	\$ _____
DISBURSED.....	\$ _____
SURCHARGE.....	\$ _____
TAX on corporate supplies.....	\$ _____
SUBTOTAL.....	\$ _____
PREPAID.....	\$ _____
BALANCE DUE.....	\$ _____

Please remit invoice number with payment  
TERMS: NET 10 DAYS FROM INVOICE DATE  
1 1/2% per month on Past Due Amounts  
Past 30 Days, 18% per Annum.

THANK YOU  
from  
Your Capital Connection



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

July 6, 1995

CAPITAL CONNECTION  
P.O. BOX 10349  
TALLAHASSEE, FL 32302

SUBJECT: JEFFREY A. SHIRK, INC.  
Ref. Number: W95000013595

We have received your document for JEFFREY A. SHIRK, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

Please return 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 (904) 487-6928.

Agnes Bundick  
Corporate Specialist

Letter Number: 595A00032726

904-487-6928

ARTICLES OF INCORPORATION

OF

Jeffrey S. Shirk, Inc.

FILED

95 AUG 15 PM 12:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, do hereby adopt the following Articles of Incorporation:

ARTICLE I

The name of the corporation is Jeffrey S. Shirk, Inc.

ARTICLE II

The duration of this corporation is perpetual.

ARTICLE III

The general purposes for which this corporation is organized are:

1. To engage in real estate sales
2. To transact any other lawful business for which corporations may be incorporated under the Florida General Corporation Act or engage in any other trade or business which can, in the opinion of the Board of Directors of the corporation be advantageously carried on in connection with or auxiliary to the foregoing business.
3. To do such other things as are incidental to the foregoing or necessary or desirable in order to accomplish the foregoing.

ARTICLE IV

The aggregate number of shares which the corporation is authorized to issue is one thousand (1,000). Such shares shall be of a single class and shall have a par value of One Dollar (\$1.00) per share.

ARTICLE V

The street address of the initial registered office of the corporation is 4612 Rommitch Lane, Pensacola, FL 32514 and the name of its initial registered agent at such address is

Jeffrey S. Shirk

ARTICLE VI

The number of directors constituting the initial Board of Director(s) of the corporation are two (2). The name(s) and addresse(s) of the person(s) who are to serve as member(s) of the initial Board of Director(s) are:

**NAME**

**ADDRESS**

Jeffrey S. Shirk

4612 Rommitch Lane

Kim E. Shirk

Pensacola, FL 32514

ARTICLE VII

The name and address of each incorporator is:

**NAME**

**ADDRESS**

Jeffrey S. Shirk

4612 Rommitch Lane

Pensacola, FL 32514

Article VIII

The corporation's principal office address is 4612 Rommitch Lane, Pensacola, FL 32514.

The principal address and the registered office address are the same.

Executed by the undersigned at Pensacola  
Florida, on the 27 day of JUNE, 1995.

Jeffrey S. Shirk  
Incorporator,  
Jeffrey S. Shirk

STATE OF FLORIDA  
COUNTY OF ESCAMBIA

Before me, the undersigned authority, personally appeared  
Jeffrey S. Shirk, known to me to be the  
individuals described in and who executed the foregoing instrument  
and acknowledged before me that they executed the same for the uses  
and purposes therein set forth.

Witness my hand and official seal on this the 27<sup>th</sup> day  
of JUNE, 1995.

Linda L. Benton  
Linda L. Benton  
Notary Public  
My Commission Expires 10/30/98



LINDA L. BENTON  
My Commission CC418287  
Expires Oct. 30, 1998  
Bonded by AND  
HXI-852-5878

**ACCEPTANCE OF DESIGNATION AS RESIDENT AGENT**

I, the undersigned, being the person named as the Registered Agent of Jeffrey S. Shirk, Inc., a Florida corporation, hereby certify that I am familiar with the obligations provided for in Florida Statutes §607.325 and hereby accept the appointment of Registered Agent and hereby accept said obligations.

DATED: 6/27/95

Jeffrey S. Shirk

STATE OF FLORIDA  
COUNTY OF ESCAMBIA

ON THIS 27<sup>th</sup> day of JUNE, 1995, before me, a notary public authorized to take acknowledgments in the State and County set forth above, personally appeared Jeffrey S. Shirk, known to me to be the person whose name is subscribed to the instrument within, and acknowledge that he executed the same for the purposes contained therein.

IN WITNESS WHEREOF, I have set my hand and official seal this 27<sup>th</sup> day of JUNE, 1995.



LINDA L. BENTON  
My Commission CC418287  
Expires Oct. 30, 1998  
Bonded by ANG  
800-882-8878

Linda L. Benton  
NOTARY PUBLIC LINDA L. BENTON  
My commission Expires: 10/30/98