P 95000071172

TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6:27 Tallahassee, FL 32314

SUBJECT: JSM Construction Management, Inc.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for: $70\ 00$

XX \$78.75

\$122.50

\$131.25

From: .

Jackie Sue McElyea 1461 27th Ave., North

St. Petersburg, Florida 33704

(813)821-5360

11 C E O 65

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Article of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

JSM Construction Management, Inc.

ARTICLE II PRINCIP. OFFICE

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Principal place: 1461 27th Ave., North

St. Petersburg, Florida 33704

Mailing Address:

P.O. Box 7425

St. Petersburg, Florida 33734

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ARTICLE IV INCORPORATOR(S)

The name and street address of the incorporator to these Articles of Incorporation is:

Jackie Sue McElyea 1461 27th Ave., North St. Fetersburg, Florida 33704

ARTICLE V OFFICERS OF THE INCORPORATION

President: Jackie Sue McElyea Vice President: David Edward McElyea

The undersigned incorporator has executed these Articles of Incorporation this // day of day of deputement, 1995.

Signature Sur Mc Elyca

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- The name of the corporation is: JSM Construction Management, Inc.
- The name and address of the registered agent and office is

Jackie Sue McElyea 1461 27th Ave., North St. Petersburg, Florida 33704 (813)821-5360

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature Sive McEigen

	PLEASE REA	AD ALL IN	STRUCTIO	NO DECODE	OCHOLE	TING THIS FORM.	
; A	PPLICATION 《器	FLOR	IIDA DEPARTI	MENT OF STATE	COMPLE	TING THIS FORM.	
; REI	FOR INSTATEMENT		Sandra B. Mortham Secretary of State		FILED		
DOCUMENT # P9500071172					96	96 DEC 31 PM 3: 36	
JSM CONSTRUCTION MANAGEMENT, INC.					ļ ç,	SECRETARY OF STATE ALLAHA: JE, FLORIDA	
JOHN JOHN WANAGEMENT, INC.					IA	ALLAHA' .:E, FLORIDA	
Principal Place of Bulainess Mailing Andress 1461-27 AVE NORTH							
	ERSBURG FL 33704	1461 27 A ST PETER	1461 27 AVE NORTH ST PETERSBURG IL 23704				
If above addresses are incorrect in any way, line through it correct information and enter- New Principal Office Address, If Applicable 3. New Mailine Office Address.				ilar correction below,	REINS	STATEMENT ON	
Suite, Apit		3. New Ma	3. New Mailing Office Address, If Applicable			porated or Qualified inness in Florida 00/19/1005	
City & Sta		State, Apt a	State, Apt #, etc			09/12/1990	
Zip	Country	Zip Zip			593	Applied For Itol Applicable	
7 Names		,	Centificate of Status Desired S8.75 Additional Fee required for Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer instead of Director (Price instead of Director)				
Title(s)	Title(s) Name of Officers and/or Director (Florida nonpri and/or Directors			Street Address of Each	,		
P	MCELYEA, JACKIE S		3 (Do NOT	Use Post Office Box N	lumbers)	4 City / State / Zi,	
V	MCELYEA, DAVID E					ST PETERSBURG FL 33704	
<u> </u>	MUCLICA, DAVID E		1461 27 AVE NORTH			ST PETERSBURG FL 33704	
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					1-4	900020459615 -01/03/9701178005	
						-01/03/9701178005 **** 375.00 ****375.00	
	;	Ì				121-21-91	
8. Name and Address of Current Registered Agent 9. Nam					9. Name and Ar	ddress of New Registered Agent	
MCELYEA, JACKE S							
1461 27 AVE NORTH Street Address (P.C. ST PETERSBURG FL 33704					Box N iberts	s Not Acceptable)	
Suite, Apt. #, Etc.						į	
10 I, being a	appointed the registered agent of the abo	ive named corpor.	ation, am familiar w	th and accept the chira	100	State Zip Code	
Signature of Registered Ac	gent Clarkee	S. YY	reslea	Many accept the con-	ations of Section	Date 12-26-96	
11. Doe Dep	es this corporation pay a ot, of Revenue under S.	ny intancil	<u>/</u>	e utes. Yes	No P	(See of er side for information	
12 I certify the this reinsta owed by th	hat I am an officer or director or the receive	re or tructee empo lution has been eli	owered to execute the temporal to the corpor	this application as provi	nded for in chapte	er 607 or 617, F.S. I further certify that when filing section 607,0401 or 617,0401, F.S., that all fees section 119,07(3)(i), F.S. The information indicated	
	_			and and and an		013-	

SIGNATURE: Orchie S. McEleyen JACKIES. MCELYRA 12-26-91.