

F060000004474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100075448191

06/02/06--01012--002 **70.00

FILED
06 JUN 29 PM 3:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

25617

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: JPW, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

James P. Wells

(Name of Person)

JPW, Inc. / dba / J Wells Agency

(Firm/Company)

PO Box 235, 308 Main St.

(Address)

Niantic, CT 06357

(City/State and Zip code)

FILED
06 JUN 29 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

James P. Wells

(Name of Person)

at (860) 691-2106

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

J. Wells Agency

Professional Investigation Services
P.O. Box 235
Niantic, CT 06357-0235
(860) 691-2106

Licensed/Bonded/Insured
Toll Free: (800) 994-1211
Fax: (860) 691-2134
Email: jimwel01@cs.com

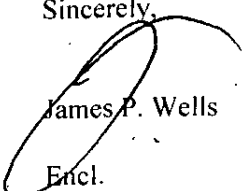
June 26, 2006

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To Whom It May Concern:

Per your request, I am enclosing two copies of my original application with the requested change of corporation name to be used in Florida to JPW, Inc. of Connecticut

Sincerely,


James P. Wells

Encl.

FILED
06 JUN 29 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
06 JUN 30 PM 12:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 16, 2006

JAMES P. WELLS
P.O.BOX 235 308 MAIN ST
NIANTIC, CT 06357

SUBJECT: JPW, INC.
Ref. Number: W06000025617

We have received your document for JPW, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

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

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 (850) 245-6925.

Cynthia Blalock
Document Specialist

Letter Number: 806A00038697

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. **JPW, Inc.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

JPW, Inc. of Connecticut

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **Connecticut**

(State or country under the law of which it is incorporated)

3. **06-1144888**

(FEI number, if applicable)

4. **8-6-1985**

(Date of incorporation)

5. **Perpetual**

(Duration: Year corp. will cease to exist or "Perpetual")

6. _____

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **308 Main St., Niantic, CT 06357**

(Principal office address)

PO Box 235, Niantic, CT 06357

(Current mailing address)

8. **Private Investigations**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **James P. Wells**

Office Address: **7615 Butler Lane**

Port St. Lucie

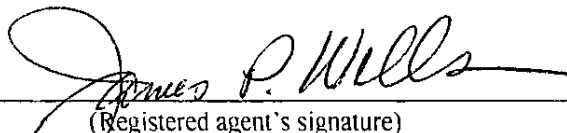
(City)

, Florida **34986**

(Zip code)

10. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED
JUN 29 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: James P. Wells

Address: 49 Hawks Nest Rd., Old Lyme, CT 06371

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

FILED
06 JUN 29 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. OFFICERS

President: James P. Wells

Address: 49 Hawks Nest Rd., Old Lyme, CT 06371

Vice President: _____

Address: _____

Secretary: Barbara Wells

Address: 19 South Trail, Niantic, CT 06357

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. James P. Wells, President

(Typed or printed name and capacity of person signing application)

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State,
and keeper of the seal thereof, DO HEREBY CERTIFY, that

J.P.W. INC.

incorporated under the laws of Connecticut is in existence.

Susan Bysiewicz

Secretary of the State

FILED
06 JUN 29 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Date Issued: May 23, 2006