No 6000058338

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05/08/06--01035--005 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5/31/06

COVER LETTER

FILED

06 HAY 30 PM 4: 29

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

SUBJECT: JAM'n, Inc.					
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)					
Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for:					
_					
\$70.00	☑ \$78.75	\$78.75	\$87.50		
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,		
	Certificate of	& Certified Copy	Certified Copy		
	Status		& Certificate		
		ADDITIONAL CO	PY REQUIRED		
		7100111011112	TTIEQUIED		
	•				
FROM: Mimi McAndrews					
Name (Printed or typed)					
PO Box 223172					
Address					
West Palm Beach, FL 33402					
City, State & Zip					
(561) 714-6430					
Daytime Telephone number					

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

FILED 06 MAY 30 PM 4: 29

SECRETARY OF STATE TALLAHASSEE, FLORIDA

May 8, 2006

MIMI MCANDREWS POST OFFICE BOX 223172 WEST PALM BEACH, FL 33402

SUBJECT: JAM'N, INC.

Ref. Number: W06000021274

We have received your document for JAM'N, INC. 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 articles of incorporation of a nonprofit corporation must be prepared in compliance with section 617.0202, Florida Statutes. Please refer to that section of the law for assistance.

You must list the corporation's principal office and/or a mailing address in the document.

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the corporation is being organized.

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 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) 245-6973.

Claretha Golden Document Specialist New Filing Section

Letter Number: 206A00032530

ARTICLES OF INCORPORATIONIn Compliance with Chapter 617, F.S., (Not for Profit)

AKIICLE I NAME	
The name of the corporation shall be:	FILED
JAM'n, Inc. Pool ARTICLE II PRINCIPAL OFFICE	06 MAY 30 PM 4: 29
The principal place of business and mailing address of this corporation shall be:	SECRETARY OF STATE
POBOX 223172 4745 Sable Pine Chale, C-2 West Palm Bunch, FL 33417	TALLAHASSEE, FLORIDA
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	I do mounting a pool hash
To promote the sport of billiards, including but not unut	this training offering
sponsoring pool fournaments, providing instru	Correct of the control of the contro
The purpose for which the corporation is organized is: To promote the sport of billiards, Including but not limited sponsoring pool fournaments, providing instruscholarships, + raising amounts of this fact ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected or appointed:	t Juming span .
As provided in the bylaws.	
ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS List name(s), address(es) and specific title(s): Mimi McAndrews 1700 Palm Beach Lakes Blvd., 7th Floor West Palm Beach, FL 33401 West Palm Beach, FL 33401	450 y 6450 y
The name and Florida street address (P.O. Box NOT acceptable) of the register	
Mimi McAndrews 1700 Palm Beach Lakes Blvd., 7th Floor West Palm Beach, FŁ 33401	·
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Mimi McAndrews 1700 Palm Beach Lakes Blvd., 7th Floor	
West Palm Beach, FL 33401	
*********************	******
laving been named as registered agent to accept service of process for the above stated con In this certificate, I am familiar with and accept the appointment as registered agent and a	
Mi CMCA A	5/21/00
Signature/Registered Agent	Date
minhold	
Signature/Incorporator	Date