POOLOGOOO 1925

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

SUBJECT:	JONESCO, INC			
	(Proposed corpo	rate name - must include su	ffix) \$00003085 -01/03/00-	59249
			*****78.75	01065014
			1 1 0	
Enclosed is an original	and one(1) copy of the article	s of incorporation and a	check for :	7
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	□ \$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: _	Kristopher R.	Jones		
	` Name (Pr	rinted or typed)	Every Company Company Many American	. O
	2026 W. Barlin	igton Dr.		FIL 00 JAN -3
		unit cos		
-	Deltona, Fl.	32725 State & Zip		ED AM 8: 20
_	(904) 532-29		A C	
	Davtime Te	elephone number		

T. Burch JAN 7 2080

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be: JONESCO, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 2742 ELKCAY BLVD.

DELTONA, FL. 32738

ARTICLE III SHARES

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

1000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

KRISTOPHER JONES

2026 WEST BARLINGTON DRIVE DELTONA, FL 32728

INCORPORATOR

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

Kristopher R. Jones 2026 W. Barlington Dr. Dettora, Fl. 32125

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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/Registered Agent