

70000066468

TRANSMITTAL LETTER

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

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-05/15/00--01155--011  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: CO-JO ENTERPRISES, INC.  
(Proposed corporate name - must include suffix)

FILED  
00 JUL 10 AM 8:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: COLLIN R. HAMMOCK  
Name (Printed or typed)

P.O. BOX 47861  
Address

JACKSONVILLE, FL 32247  
City, State & Zip

904-571-7509 / 904 non-9441  
Daytime Telephone number

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

W-12991 LR 7/12



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

May 18, 2000

COLLIN R. HAMMOCK  
P.O. BOX 47861  
JACKSONVILLE, FL 32247

SUBJECT: CO-JO ENTERPRISES, INC.  
Ref. Number: W00000012991

We have received your document for CO-JO ENTERPRISES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

In Article IV please list the name of the Registered Agent.

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

The registered agent must sign accepting the designation.

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) 487-6929.

Shannon Thompson  
Document Specialist

Letter Number: 500A00028337



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

June 14, 2000

COLLIN R. HAMMOCK  
P.O. BOX 47861  
JACKSONVILLE, FL 32247

SUBJECT: CO-JO ENTERPRISES, INC.  
Ref. Number: W00000012991

We have received your document for CO-JO ENTERPRISES, INC. and your check(s) totaling \$87.50. 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.

Please provide us with a phone number where you can be reached during working hours. The number given on the cover letter is not in service.

In Article IV please list the name of the Registered Agent.

The registered agent must sign accepting the designation.

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) 487-6929.

Shannon Thompson  
Document Specialist

Letter Number: 500A00028337

## 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 NAME

The name of the corporation shall be:

CO-JO ENTERPRISES, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

P.O. BOX 47861

JACKSONVILLE, FL 32247

### ARTICLE III SHARES

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

100

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Collin R. Hammock  
2505 White Horse Rd East  
Jacksonville, FL 32246

### ARTICLE V INCORPORATOR

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

COLLIN R. HAMMOCK

P.O. BOX 47861

JACKSONVILLE, FL 32247

x Collin R. Hammock  
Signature/Incorporator

x 4-29-00  
Date

(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.

Collin R. Hammock  
Signature/Registered Agent

6-29-00  
Date

FILED  
00 JUL 10 AM 8:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA