P0/89901851

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

SUBJECT:	SANNIE L.	JONES JING	J.		
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) 600004429745-7 -05/19/0101063003 ******78.75 ******78.75 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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	2515 Hubb	JONES Inted or typed) SARJ SIRER		·	
	JACKSONVILLE City, S	Idress FL 3220(tate & Zip	ALLAHASSET:	FILED 01 JUN 18 AM SECRETARY OF	
	Saytime Tel	ephone number		ANIII: 31	

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

10,00

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME
The name of the corporation shall be:
SANNIE L JONES ANC.
LARE WE TO
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:
2515 HUBBARD STREET JACKSONVILLE FL 32206
SANNIE L JONES ANC, ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 2515 HUBBARD SARERA JACKSONVILLE FL 32206
ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
CLARIED NEW BUSINESS: LRUCKING BUSINESS
ARTICLE IV SHARES
The number of shares of stock is: 500 SHARES
700 2M40150
ADDICE II II DIETAY OFFICE DE LE COMPONIO DE LA COMPONIO DEL COMPONIO DE LA COMPONIO DE LA COMPONIO DEL COMPONIO DE LA COMPONIO DEL COMPONIO DE LA COMPONIO DEL COMPONIO DE LA COMPONIO DEL COMPONIO DE LA COMPONIO DE LA COMPONIO DE LA COMPONIO DEL COMPONIO DE LA COMPONIO DEL COMPONIO DE LA COMPONIO DE LA COMPONIO DE LA COMPONIO DEL COMPO
ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(es):
SANNIE L JONES
,
2515 HUBBARD S/Reet
Jacksonville FL 32206
ARTICLE VI REGISTERED AGENT
The <u>name and Florida street address</u> of the registered agent is:
Sannie L. Jones
2515 Hullard street
Jackmonoulle FL 32206
ARTICLE VII INCORPORATOR The name and address of the Incomposite in
The <u>name and address</u> of the Incorporator is:
Sannie 1 Janea
2515 Hulland Street
Julnonule FL 32206 ***********************************
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity
Samuel Dans
Signature/Registered Agent Date
Date Date
Manuel Jan 11
Signature/Registered Agent Date Column Col
Jaco