

**TRANSMITTAL LETTER**  
**P02000107281**

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

400006126994--2  
-10/01/02--01042--003  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

**SUBJECT:** JFL & Associates, Inc.  
**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

Enclosed are 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:** John F. Love  
Name (Printed or typed)

2461 Poinciana Ct  
Address

Weston, FL 33327  
City, State & Zip

954-385-3653  
Daytime Telephone number

**FILED**  
**02 OCT - 1 PM 1:12**  
**SECRETARY OF STATE**  
**TALLAHASSEE FLORIDA**

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

**10/1**  
**80**

# 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:

"JFL & Associates, Inc."

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2461 Poinciana Ct  
Weston, FL 33327

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Corporation

## ARTICLE IV SHARES

The number of shares of stock is:

100,000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

John F. Love President

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

John F. Love  
2461 Poinciana Ct  
Weston, FL 33327

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

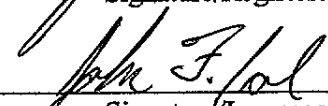
John F. Love  
2461 Poinciana CT  
Weston, FL 33327

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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

  
Signature/Registered Agent

  
Date

  
Signature/Incorporator

  
Date

FILED  
02 OCT -1 PM 1:12  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA