## P03000003231

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Octanica copies				
Special Instructions to Filing Officer:				
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## TRANSMITTAL LETTER

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

SUBJECT:	St. John & Son, Inc	_ <del></del>	•	
	(PROPOSED CORPORA	te name – <u>Must Incl</u>	UDE SUFFIX)	
Enclosed are an original	ginal and one (1) copy of the arti	cles of incorporation and	d a check for:	
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status  PY REQUIRED	
FROM:	Scott M. Gerard,	Esq.		
^ *******	Name (Printed or typed)			
	265 Post Road Wes	st <u>-</u>		
-		Address		
	Westport, CT 068	380	2	
-	City, State & Zip			
	203-454-4811	 	_	
-	Daytime To	cicphone number	<del></del>	

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

A DEVELOPA OF THE CORD OF A STORY	_		
ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, I	F.S. (Profit)		
ARTICLE I NAME			
The name of the corporation shall be:	<del></del>		
St. John & Son, Inc.	-		
ARTICLE II PRINCIPAL OFFICE	Z.	e <del>-</del>	
The principal place of business/mailing address is:			
175 N.E. Olive Way Boca Raton, Florida 33432	*E3		
ARTICLE III PURPOSE	<del></del>	<b>ವ</b> ೯	-
The purpose for which the corporation is organized is:	<del></del>		
Do all activities allowed by Florton, operation of a coin operated			
ARTICLE IV SHARES	er		
The number of shares of stock is:			
One thousand (1,000)			
ARTICLE V INITIAL OFFICERS/DIRECTO	ORS (optional)	2	93.
The name(s), address(es) and title(s):		A H	
Dawn M. St. John - President/Direct	ctor	- ASS	A -1
175 N.E. Olive Way Boca Raton, Florida 33432			SE 모 [
			FILED  JAN-7 PH 3: 12
ARTICLE VI REGISTERED AGENT	-	-	
The <u>name and Florida street address</u> of the registered	-		
Dawn M. St. John - President/Direct 175 N.E. Olive-Way	ct <u>or</u>	_	
Boca Raton, Florida 33432	 	- -	
ARTICLE VII INCORPORATOR	<del>,</del>		
The <u>name and address</u> of the Incorporator is:			
Dawn M. St. John - President/Direc	ctor		
175 N.E. Olive Way Boca Raton, Florida 33432	<del>=-</del>		
******************	*******	*****	******
Having been named as registered agent to accept service of proceertificate, I am familiar with and accept the appointment as regis			ce designated in this
1 hlan Ox of the		12. 30	,
Signature/Registerell Agent	<del></del>	Date	