

PO3000042930

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

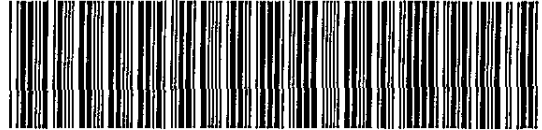
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900015771309

01/14/03--01049--012 **78.75

FILED

03 APR 14 AM 8:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: JACQUELINE STAAB, 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: JACQUELINE STAAB
Name (Printed or typed)

3875 FAIRBANKS FOREST DRIVE
Address

JACKSONVILLE, FLORIDA 32223
City, State & Zip

904 / 358-2090
Daytime Telephone number

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

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: JACQUELINE STAAB, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 3875 FAIRBANKS FOREST DRIVE
JACKSONVILLE, FLORIDA 32223

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To transact any and all
business legal under state and federal law.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ARTICLE VI REGISTERED AGENT

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

JACQUELINE STAAB
3875 FAIRBANKS FOREST DRIVE
JACKSONVILLE FLORIDA 32223

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JACQUELINE STAAB
3875 FAIRBANKS FOREST DRIVE
JACKSONVILLE, FLORIDA 32223

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

Signature/Incorporator

FILED
03 APR 14 AM 8:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/9/03

Date

4/9/03

Date