

P03000053185

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

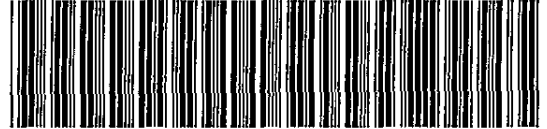
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

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05/14/03--01076--001 \*\*78.75

RECEIVED  
03 MAY 14 PM 12:46  
DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

03 MAY 14 PM 12:49  
SEC. OF STATE  
TALLAHASSEE, FLORIDA

FILED

## TRANSMITTAL LETTER

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

SUBJECT: JAX TELECOM, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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:

Young O. Larsen  
Name (Printed or typed)

#1 palmetto Drive, Greenacre Rd.  
Address

Crawfordville, FL 32327  
City, State & Zip

850-877-2128  
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:

Jax Telecom Inc.

FILED  
03 MAY 14 PM 12:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1367 Mahan Drive  
Tallahassee, FL 32308

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Business

## ARTICLE IV SHARES

The number of shares of stock is:

100 shares

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Julia Larsen, president  
1367 Mahan Drive  
Tallahassee, FL 32308

## ARTICLE VI REGISTERED AGENT

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

Julia Larsen,  
1367 Mahan Drive  
Tallahassee, FL 32308

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Julia Larsen  
1367 Mahan Drive  
Tallahassee, FL 32308

\*\*\*\*\*  
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

5/13/03  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

5/13/03  
\_\_\_\_\_  
Date