Po4000012988

(Requestor's Name)
(Address)
(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:
AUTHORIZATION BY PHONE TO CORRECT_COPNOMO DATE
BOO. LIVIN

Office Use Only



200025879292

01/09/04--01092--004 **78.75

TALL METAGE FOR THE SECOND AND THE S

hy al

TRANSMITTAL LETTER

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

SUBJECT:	ITM			
	(PROPOSED CORPORAT	E NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	les 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:	Charles Ren	Printed or typed)		
1844 Evergreen dr				
	WPB FL	3340 State & Zip	lo	
	501- LO Daytime To	59 - 0387 elephone 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: CJ Inc. of South F	-lorida
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is: 1884 EWANDOM CIT WPB R 33406	
ARTICLE III PURPOSE	-
The purpose for which the corporation is organized is: +0 Whowe was iness.	
ARTICLE IV SHARES The number of shares of stock is:	FIL 04 JAN - SECKETAR TALLAMASS
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	-9 PM -9 PM 887 CF (S
List name(s), address(es) and specific title(s):	
Charles Remy President Geneva Remy vice President	ED PI 1: 40
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
Geneva Remy on ch WPB FL 33406	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Charles Lemy	
Acticle vivi effective date 111104	*******
Having been named as registered agent to accept service of process for the above stated corporation at the	
certificate, fam familiar with and occept the appointment as registered agent and agree to act in this capacity	ny In 1
Signature/Registered Agent	Date
Signature/hoornoraths	e D
Signature/Incorporator	Date