P04000014322

(Requestor's Name)				
(Address)				
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(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(======================================				
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

Department of State				
Division of Corporations				
P.O. Box 6327			-	
Tallahassee, FL 32314				
SUBJECT:	JACOB FLINT, INC.			
SUBJECT:	(Proposed corporate name	- must include suffix)		
	(110posed corporate name	mast metade banning		
		_		
Enclosed is an original at	nd one (1) copy of the a	articles of incorporation	n and a check for:	
□ \$70.00	x ⊠ \$78.75	□ \$122.50	□ \$131.25	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
типів тес	& Certificate	& Certified Copy	Certified Copy	
	& Ceruncate	& Certified Copy	& Certificate	
			d Ceruncate	
•		ADDITIONAL CO	PY REQUIRED	
	.			
FROM: _	BONNIE FLINT			
Name (Printed of typed)				
·	535 State Road 10	ın		
Address				
	77	_		
	Palatka, FL 32177			
	City, State & Zip			
	(204) 202 0254			

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

Daytime Telephone number

FILED

ARTICLES OF INCORPORATION

04 JAN 14 PM 2: 11

1. The name of the corporation shall be:JA	ACOB FLINT, INC.	SECRETARY OF STATE
2. The principal place of business and mailing a 535 State Road 100, Palatka, FL		s:
3. The corporation shall have the authority to	issue <u>1,000</u>	shares of stock.
4. The registered agent of the corporation is registered street address is 535 State R Florida32177		and the
5. The initial Board of Directors shall have 4 is/are as follows: President - JOSIAH P FLIN Secretary - CAROLYN M JACOB; Tr The number of directors may be raised of the state of the stat	T. JR: Vice President easurer - BONNIE P FLIN	<u>MATTHEW W JACOB;</u>
corporation but shall in no case be less than or 6. The incorporator of this corporation is _street address is _535 State Road 100. Palat	BONNIE FLINT	
Dated <u>///3/64</u>		
	Banni H Incorporator	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Dated _/ / 13/04

Registered Agent