

PO 40000 19443

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

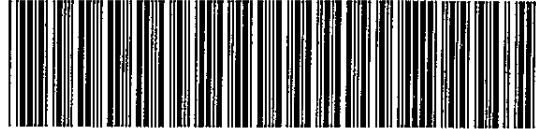
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Triple J Technology, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Katherine Mancil
Name (Printed or typed)

37 Hemlock Terrace Drive
Address

Ocala, FL 34472
City, State & Zip

352-427-4965
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:

Triple J Technology, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

7277 S.E. Maricamp Road, Suite D Ocala, FL 34472

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail Sales and Service

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

President Jimmy Mancil, Jr. 37 Hemlock Terrace Drive Ocala, FL 34472

Vice-President Katherine Mancil 37 Hemlock Terrace Drive Ocala, FL 34472

ARTICLE VI REGISTERED AGENT

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

Jimmy Mancil, Jr. 37 Hemlock Terrace Drive Ocala, FL 34472

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Katherine Mancil 37 Hemlock Terrace Drive Ocala, FL 34472

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

1/19/04
Date


Signature/Incorporator

1/19/04
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA