## P04000021552

(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
(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



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FLORIDA DEPARTMENT OF STATE OWISION OF GOAPCHAIT WE

Glenda E. Hood Secretary of State

January 7, 2004

ROSAELIA CARDENAS 17311 ALICO CENTER RD STE B FT MYERS, FL 33912

SUBJECT: J C MASONRY INC. Ref. Number: W0400000716

We have received your document for J C MASONRY INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

An effective date may be added to the Articles of Incorporation if a 2004 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Document Examiner New Filings Section

Letter Number: 404A00001034

RECEIVED

04 FEB -2 PM 5: 34

TALLAHASSEL, FLORIDA

## TRANSMITTAL LETTER

PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX

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

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
□ \$70.00 Filing Fee	\$\frac{1}{2}\$\$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: Bosaelia Corderas Name (Printed or typed)				
17311 Alica Center Road Ste B				
Ff. Myers, FL 33912 City, State & Zip				
239-707-6033 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)	FILED
ARTICLE I NAME	
The name of the corporation shall be:	04 FEB -2 AM 9:0
Crown Masonry Group, Inc.	SECRETARY OF CHATE TALLAHASSEE, FLORID
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
17311 Alico Center Rd Ste B	
Ft. Mycrs, FL 33912 .	
ARTICLE III PURPOSE	· <u>-</u> .
The purpose for which the corporation is organized is:	
The Corporation shall engage in any activity or ander the Laws of the United States and or	buisness permitted
chief the chos of the United States and of	the State of Florida
ARTICLE IV SHARES	
The number of shares of stock is: 100 Shares Of Common Stock Dollar(s) (1.00) par	
which Shall be designated "Common Shares."	Value Common Stack,
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s), address(es) and title(s):	
ARTICLE VI REGISTERED AGENT	•
The <u>name and Florida street address</u> of the registered agent is:	
Robaelia Cardenas 17311 Alico Center Rd Ste B	
• •	
Ft. Mycs, FL 33912	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Rosaelia Cardenas	
1736 Alico Center Rd Ste B	
T+-Mycg FL 33912 ************************************	
Having been named as registered agent to accept service of process for the above stated corp certificate, I am familiar with and accept the appointment as registered agent and agree to act	oration at the place designated in this t in this canacity
zenijuace, i um jammur wan unu uctepi me apponiment us registereu ugen unu ugree is un	, , , ,
hosas/ia Cardenas	12/3/03
Signature/Registered Agent	Date
	/ /
Rosalía Cardenas	12/3/03
Ko Sa Ela Cardena S Signature/Incorporator	Date
pretiment to the potage.	