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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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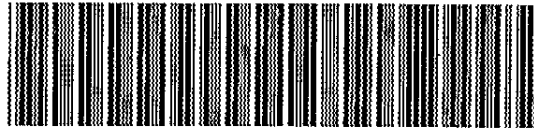
(Business Entity Name)

(Document Number)

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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: RENT SOURCE JACKSONVILLE, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

FROM: TRICIA VAN SANDT

Name (Printed or typed)

648 E. UNION ST.

Address

JACKSONVILLE, FL 32206

City, State & Zip

904-981-9191

Daytime Telephone number

FEIN # 56-2431055

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:  
RENT SOURCE JACKSONVILLE, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:  
648 E. UNION ST., JACKSONVILLE, FL. 32206

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
REAL ESTATE MANAGEMENT, SALES, AND TENANT SERVICES.

**ARTICLE IV SHARES**

The number of shares of stock is:  
100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):  
PATRICK S. KENNEDY, PRES. 7725 ELVIA DR., JACKSONVILLE, FL. 32211  
TRICIA VAN SANDT, SEC/TREAS., 4659 HOMESTEAD RD., JACKSONVILLE, FL. 32210  
SHIRLEY J. BAILEY, VICE PRES., P.O. BOX 40, SUWANNEE FL. 36036

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:  
TRICIA VAN SANDT, 648 E. UNION ST. JACKSONVILLE, FL. 32206

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:  
TRICIA VAN SANDT, 648 E. UNION ST. JACKSONVILLE, FL. 32206

\*\*\*\*\*

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

1-30-04  
Date

  
Signature/Incorporator

1-30-04  
Date

FILED

04 FEB -5 AM 8:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA