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## TRANSMITTAL LETTER

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

Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ر م	ADDITIONAL CO	PY REQUIRED
FROM:	JONALD JONES Name	(Printed or typed)	
	1/26 SW Ingra	Ssina Ave.	
	• •	e Fl. 349	53
	City, フフム- 343	State & Zip	
		elephone number	<del></del>

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

APTICLE I	NA WE			<b>~</b> 1		201 F	A)/ .	
The name of the	NAME corporation shall be:	DONACI	Jones	floore	over in	7 1	.~CL	
ARTICLE II	PRINCIPAL OF	FICE						
The principal place //2 (	ce of business/mailing  SW INGF  + ST. Lucie	address is:	40e.		·			
ARTICLE III	PURPOSE							
	which the corporatio	n is organize	d is:		ं चार्का ः	•		
Install	Vinyl F	looring		-				
ARTICLE IV The number of sh	SHARES nares of stock is:	er mæ.	e v	<u> </u>		SECRETAR ALLAHASI	04 HAR -1	T1
ARTICLE V	INITIAL OFFIC	ERS AND/	OR DIRECT	ORS			ŧ	7) ]
List name(s), add	dress(es) and specific	title(s):						J
DONAC	D Jones	Precid	ev7				3. 24	
ARTICLE VI The name and F  DONAC	REGISTERE  lorida street address  Dones  U Ingrassing	ED AGENT of the registe	ered agent is:	1- 1 <del>-</del>		Tella de de la companya de la compan		
ARTICLE VI The name and F  DONAC  1126 S  Post  ARTICLE VII	REGISTERE  lorida street address  D Jones  W Ingrassing  T, Lucie Fl  INCORPORAT	D AGENT of the registr のと、 ・ そくタン 3 FOR	ered agent is:	· • • • • • •	<del>-</del>	Total A		
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