

P04000044538

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

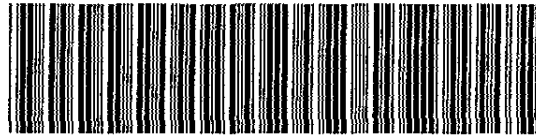
(Document Number)

Certified Copies _____

Certificates of Status _____

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04 MAR -4 PM 1:50
SEC. OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: JAMES SEBASTIAN INCORPORATED
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: JAMES HICKMAN, AGENT
Name (Printed or typed)

220 GOVERNMENT STREET, STE1,
Address

NICEVILLE, FL 32578
City, State & Zip

850-729-8585
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:

JAMES SEBASTIAN INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

53 BLUE BOTTLE COURT
DEFUNIAK SPRINGS, FL 32433

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ENGAGE IN GENERAL BUSINESS FOR A PROFIT

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES NO PAR COMMON STOCK

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

JAMES L. SEBASTIAN, PRESIDENT
53 BLUE BOTTLE COURT
DEFUNIAK SPRINGS, FL 32433

ARTICLE VI REGISTERED AGENT

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

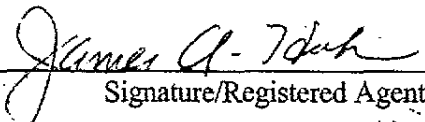
JAMES A. HICKMAN,
220 GOVERNMENT STREET, STE1
NICEVILLE, FL 32578

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAMES L. SEBASTIAN
53 BLUE BOTTLE COURT
DEFUNIAK SPRINGS, FL 32433

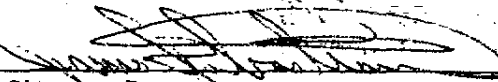
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

1-28-2004

Date



Signature/Incorporator

1-28-2004

Date

FILED

04 MAR -4 PM 4: 50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA