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| (Re | equestor's Name) | |
|-------------------------|----------------------------|-----------|
| (Ac | ldress) | |
| (Ac | ldress) | |
| (Ci | ty/State/Zip/Phone | » #) |
| PICK-UP | ☐ WAIT | MAIL MAIL |
| (Bt | isines s Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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| | Office Use Oni | ly |



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NOW MAR 29 P 3 42;

SECRETARY OF STATE TALLAHASSEE, FLORIDA

TALLAHASSEE, FLORIDA

TOTAL MARKET AND THE STATE OF STATE OF

TRANSMITTAL LETTER

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

| SUBJECT: | J. A. M. ENTER | | Nc. |
|----------------------|----------------------------------|----------------------------|------------------|
| , | (PROPOSED CORPORA | TE NAME <u>– MUSTONCIO</u> | UDE SUFFIX) |
| | | | |
| Enclosed are an orig | inal and one (1) copy of the art | icles of incorporation and | a check for: |
| \$70.00 | \$78.75 | □ \$78.75 | \$87.50 |
| Filing Fee | Filing Fee | Filing Fee | Filing Fee, |
| _ | & Certificate of Status | & Certified Copy | Certified Copy |
| | | | & Certificate of |
| | | ADDITIONAL CO | Status |
| | | ADDITIONAL CO | PI KEQUIKED |
| FROM: | JoHn Min | (Printed or typed) | |
| | 1/305 44 | Address | |
| , | Treasure to | State & Zip | 3376 |
| | 727- 363- Daytime | - 7391 Telephone number | |

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



February 25, 2004

RECEIVED 04 HAR 29 PM 2:11 FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

TAIT AHACCES TO CONTROL TO STATE

TAIT AHACCES TO CONTROL TO STATE

TAIT AHACCES TO CONTROL TO STATE

TO CONTROL TO CONT TALLAHASSEE FLORIDA

JOHN MCINTOSH 11305 4TH ST E. TREASURE ISLAND, FL 33706

SUBJECT: MCINTOSH ENTERPRISES INC.

Ref. Number: W04000005351

We have received your document for MCINTOSH ENTERPRISES INC.. However, the document has not been filed and is being returned for the following:

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.

The document number of the name conflict is P93000014017.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

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) 245-6934.

Loria Poole **Document Specialist** New Filings Section

Letter Number: 104A00012626

| In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) | | * * * * * * |
|--|--|-------------|
| ARTICLE I . NAME | | |
| The name of the corporation shall be: | | |
| MCINTOSH & MCINTOSH, INC. | MAR 29 RETARY HASSEE | I |
| ARTICLE II PRINCIPAL OFFICE | • `O | |
| The principal place of business/mailing address is: | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | η |
| 11305 44h ST.C | | J |
| Treasure Island FL 33706 | ADA Et | |
| ARTICLE III PURPOSE | 3 % | |
| The purpose for which the corporation is organized is: | | |
| For Profit BUSINESS | | |
| ARTICLE IV SHARES The number of shares of stock is: /60 | | |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): | v • | |
| THE METHOD (CO) | | |
| JOHN ME IN TOSK SEVETANG | | |
| JoHO M ZWISSON | | |
| TURNSURE ISMOND PL 33700 | <u>-</u> · | |
| ADMINISTRE ISMAN ACTION | | |
| ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: | • | |
| JOHN MC IN 703 L | | |
| | • | |
| Transure Bland AL 33706 | | |
| ARTICLE VII INCORPORATOR | | |
| The name and address of the Incorporator is: | | |
| 30 EN MC IN 700 L | ı | |
| 11305 1/th ST & Transme | TSLOW PL | 33 |
| ****************** | ********* | **** |
| Having been named as registered agent to accept service of process for the above state certificate, I am familiar with and accept the appointment as registered agent and agree | | ed in this |
| -A | -1/24/04 | |
| Signature/Registered Agent | Date | |
| //// | 1/2/11/ | |
| The comment of the co | 1/24/04 | |
| Signature/Incorporator | Date | |