

PO4000068902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

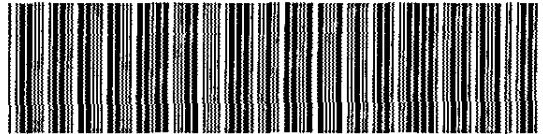
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700033710627

04/26/04--01007--008 **78.75

04 APR 23 PM 6:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

TRANSMITTAL LETTER

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

SUBJECT: R. A. JENNINGS 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
Filing Fee

☒ \$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: ROBERT JENNINGS
Name (Printed or typed)

13 ST CHARLES PLACE
Address

FLAGLER BCH FL 32136
City, State & Zip

386-439-0999
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:

R.A. JENNINGS INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

13 ST CHARLES PLACE
Ft. Lauderdale FL 32136

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional corporation

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):

ROBERT A JENNINGS President
13 ST CHARLES PLACE
Ft. Lauderdale FL 32136

ARTICLE VI REGISTERED AGENT

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

ROBERT A JENNINGS
13 ST CHARLES PLACE
Ft. Lauderdale FL 32136

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROBERT JENNINGS
13 ST CHARLES PLACE
Ft. Lauderdale FL 32136

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

Date

Signature/Incorporator

Date

FILED
04 APR 23 PM 6:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA