

P04000086968

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

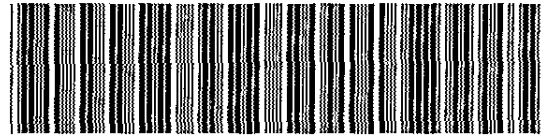
(Document Number)

Certified Copies X

Certificates of Status X

Special Instructions to Filing Officer:

Office Use Only



600037030266

06/04/04 -01002- -007 \*\*87.50

FILED  
2004 JUN -3 PM 3:44  
DEPARTMENT OF STATE  
TALLAHASSEE FLORIDA  
RECEIVED  
04 JUN -3 PM 3:35  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE FLORIDA

158 6/3/04

TRANSMITTAL LETTER

FILED

2004 JUN -3 PM 3:44

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

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

SUBJECT: E. L. JENKS Inc.  
(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 of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM:

ERIC L. JENKINS

Name (Printed or typed)

516 SHAW CREEK DR.

Address

OCFEE, FL. 34761

City, State & Zip

(H) 407-656-6292 (C) 321-662-5913

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)

**FILED**

**ARTICLE I NAME**

The name of the corporation shall be:

*E.L. Jenks Inc.*

2004 JUN -3 PM 3:44

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

*516 SHAL CREEK DR  
OCUOSE, FL. 34761*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*Dump Truck operation*

**ARTICLE IV SHARES**

The number of shares of stock is: *2*

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

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

*ERIC L. JENKINS President*

*CAROL D. JENKINS Vice-President*

**ARTICLE VI REGISTERED AGENT**

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

*ERIC L. JENKINS  
516 SHAL CREEK DR.  
OCUOSE, FL. 34761*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*ERIC L. JENKINS  
516 SHAL CREEK DR.  
OCUOSE, FL. 34761*

\*\*\*\*\*  
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]*

Signature/Registered Agent

*6/3/04*

Date

*[Signature]*

Signature/Incorporator

*6/3/04*

Date