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(Requestor's Name)		
(Address)		
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Certified Copies	_ Certificates	of Status
Consist Instructions to	Em- Officer	
Special Instructions to Filing Officer:		
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TRANSMITTAL LETTER

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

SUBJECT:J&S-	-GCR.inc		
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the ar	ticles of incorporation and	a check for:
□ ago oo	D ago ar		FA toz co
\$70.00	\$78.75	\$78.75	≥ \$87.50
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy
	& Certificate of Status	& Certified Copy	& Certificate of
			Status
		ADDITIONAL CO	•
EDOM: D	anny Ramos-Gonzalez		
PROM:	Name	e (Printed or typed)	
	9205 Shellgrove ct		
Address			
		, 1,1,11,100	
	Tampa Florida 33615		
•	•	, State & Zip	
	(813) 843-5939		
•	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:

J&S -GCR.INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 9205 Shellgrove CT Tampa FI, 33615

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: General Construction Remodelin

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Danny Ramos-Gonzalez 9205 Shellgrove CT Tampa FL, 33615 Tile Installer

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Danny Ramos Gonzalez 9205 Shellgrove CT Tampa Fi, 33615

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Danny Ramos Gonzalez 9205 Sheilgrove CT Tampa Fl, 33615

***************************************	****************
Having been named as registered agent to accept service of process for t	he above stated corporation at the place designated in this
certificate, I am familiar with and accept the appointment as registered ag	ent and agree to act in this capacity
(Mar)	6/23/04
Signature/Registered Agent	Date

Signature/Incorporator

Cel 23/04

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