PO4000/34647

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TRANSMITTAL LETTER

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

SUBJECT: Johnko	, Inc.		
	(PROPOSED CORPOR	ATE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a check for:
—			
\$70.00	2 \$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
			Status
		ADDITIONAL COPY REQUIRED	
FROM: Jo	hnko, Inc.	and the second second second second	Lambagaine, in a specimental control of
	Name	(Printed or typed)	-
	4418 North Ascot Circle		
		Address	and the same of the same of
	Sarasota, Florida 34235		
		, State & Zip	•
		, 	
	941-355-8145		
		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:

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Johnko, Inc.

SEGRETARION STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 4418 North Ascot Circle, Sarasota FL 34235

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Sales of plastic packaging equipment and materials.

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):

John Kopinski, president: 4418 North Ascot Circle, Sarasota, FL 34235

ARTICLE VI REGISTERED AGENT

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

Howard Veltz, CPA, 2219 39th Street West, Bradenton FL 34205

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

John Kopinski, 4418 North Ascot Circle, Sarasota FL 34235

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

Signature/Incorporator

Date

Date