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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C.J. 11/9

## TRANSMITTAL LETTER

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

**SUBJECT:** John Michael Management Services 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:** John F. Rodriguez

\_\_\_\_\_  
Name (Printed or typed)

6402 Beaver Way

\_\_\_\_\_  
Address

Tampa, Florida 33625

\_\_\_\_\_  
City, State & Zip

813-927-7483

\_\_\_\_\_  
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:

John Michael Management Services Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5907 Johns Rd.  
Tampa, Florida 33634

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
Management Services

### 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 F. Rodriguez  
6402 Beaver Way  
Tampa, Florida 33625  
President

### ARTICLE VI REGISTERED AGENT

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

John F. Rodriguez  
6402 Beaver Way  
Tampa, Florida 33625

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

John F. Rodriguez  
6402 Beaver Way  
Tampa, Florida 33625

\*\*\*\*\*

*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

11/1/04  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

11/1/04  
\_\_\_\_\_  
Date

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