

P04000161672

(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



200042715892

11/22/04--01046--012 **70.00

FILED
04 NOV 22 PM 3:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓

12/1/04
B2

TRANSMITTAL LETTER

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

SUBJECT: J C REAGAN 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: JOHN C. REAGAN

Name (Printed or typed)

4474 SUMMER HAVEN BLVD. S.

Address

JACKSONVILLE, FL 32258

City, State & Zip

904 993-1542

Daytime Telephone Number

NOTE: Please provide the original and one copy of the Articles.

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I

CORPORATE NAME: *The name of the Corporation shall be:*

J C REAGAN INC.

FILED
04 NOV 22 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FL 32399

ARTICLE II

PRINCIPAL OFFICE: *The principal place of business and mailing address of this corporation shall be:*

**4474 SUMMER HAVEN BLVD. S.
JACKSONVILLE, FL 32258**

ARTICLE III

PURPOSE: *The purpose for which the corporation is organized is to conduct mortgage consulting within accordance of the business laws for the State of Florida.*

ARTICLE IV

AUTHORIZED CAPITAL STOCK: *The total number of shares of which the Corporation shall have the authority to issue is 5000 shares, and the par value of each share shall be:*

\$1.00/share

*ARTICLE V
INITIAL OFFICERS:*

*PRESIDENT: JOHN C. REAGAN 4474
SUMMER HAVEN BLVD. S.
JACKSONVILLE, FL 32258*

ARTICLE VI

*INITIAL REGISTERED OFFICE/AGENT: The street address of the
Corporation's initial registered office in the State of Florida is:*

*4474 SUMMER HAVEN BLVD. S.
JACKSONVILLE, FL 32258*

and the name of its initial registered agent at such address is:

Gary Place

ARTICLE VII

*INCORPORATOR(S): The name and address of the incorporator(s)
to theses Articles of Incorporation are:*

*JOHN C. REAGAN
4474 SUMMER HAVEN BLVD. S.
JACKSONVILLE, FL 32258*

*The undersigned has executed these Articles of Incorporation on
this, the 19th day of NOV. 2004*


Incorporator's Signature

Incorporator(s)'s Signature

.....

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.

Angela
Signature of Registered Agent

11/19/04
Date

JHC King
Signature of Incorporator

11/19/04
Date