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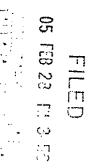
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PICK-UP	☐ WAIT	MAIL	
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Certified Copies	Certificates	of Status	
Special Instructions to	Filing Officer:		
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TRANSMITTAL LETTER

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

SUBJECT: Jeffs M	iaintenance, Inc. (PROPOSED CORPORA	TE NAME — MUST INCL	UDESULTIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: Jef	frey Arnold Name	(Printed or typed)	
:	8401 Buena Vista Rd.	Address	
į	Fort Myers, Fl 33912 City	, State & Zip	
<u>:</u>	239-634-4653	Celenhone 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:

Jeff's Maintenance, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 8401 Buena Vista Rd.

Fort Myers, Fl 33912



The purpose for which the corporation is organized is:

maintenance that might be needed around a home such as changing light bulbs, replacing locks, hanging pictures or curtian rods, and other maintenace needs that some can't do on their own.

ARTICLE IV SHARES

The number of shares of stock is:

1500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

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

Jeffrey Arnold 8401 Buena Vista Rd. Fort Myers, Fi 33912

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jeffrey Arnold 8401 Buena Vista Rd. Fort Myers, Fl 33912

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 familian with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Date

Signature/Incorporator

Date

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