

P05000041619

(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C.S. 3-18

## TRANSMITTAL LETTER

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

**SUBJECT:** JOHN COLLINS CONCRETE & RUBBING, 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 C. COLLINS

Name (Printed or typed)

2319 PALMDALE STREET

Address

JACKSONVILLE, FL 32208

City, State & Zip

(904) 374-9451

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 COLLINS CONCRETE & RUBBING, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

2319 PALMDALE STREET  
JACKSONVILLE, FL 32208

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

CONCRETE INSTALLATION AND REPAIR

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

JOHN C. COLLINS / PRESIDENT  
2319 PALMDALE STREET  
JACKSONVILLE, FL 32208

**ARTICLE VI REGISTERED AGENT**

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

JOE D. JEFFERSON  
5412 MORSE AVE.  
JACKSONVILLE

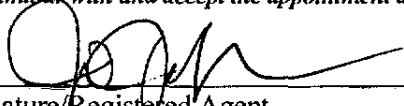
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JOHN C. COLLINS  
2319 PALMDALE STREET  
JACKSONVILLE, FL 32208

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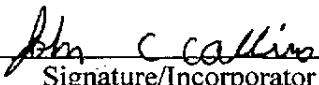
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



Signature/Registered Agent

03/09/2005

Date



Signature/Incorporator

03/09/2005

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 MAR 14 PM 2:25

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