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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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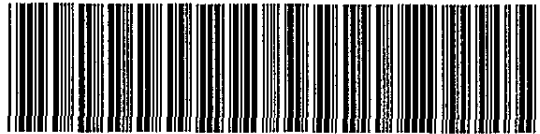
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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6511032 11:29
11/22/05

TRANSMITTAL LETTER

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

SUBJECT: THE JAROCKI GROUP, 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: William JAROCKI
Name (Printed or typed)

5168 N.W. 57 DRIVE
Address

CORAL SPRINGS, FL. 33067
City, State & Zip

954-646-4634
Daytime Telephone number

FILED
05 MAR 22 PM 1:29
TALLAHASSEE, FLA.

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:

THE JAROCKI GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5168 N.W. 57 DRIVE
CORAL SPRINGS, FL. 33067

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESS

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):

WILLIAM JAROCKI - PRESIDENT
VERONICA JAROCKI - VICE PRESIDENT
5168 N.W. 57 DRIVE
CORAL SPRINGS, FL. 33067

ARTICLE VI REGISTERED AGENT

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

WILLIAM JAROCKI
5168 N.W. 57 DRIVE
CORAL SPRINGS, FL. 33067

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

WILLIAM JAROCKI
5168 N.W. 57 DRIVE
CORAL SPRINGS, FL. 33067


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



Date



Signature/Incorporator



Date

FILED

05/11/22 11:16:29