

705000046593

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

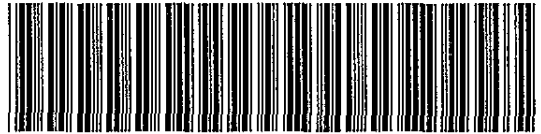
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: JOHN T. WOODS, 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 T. WOODS
Name (Printed or typed)

4834 7th AVE N.
Address

ST. PETERSBURG FL 33713
City, State & Zip

727-599-6058
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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 T. WOODS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:
4834 7th AVE N.
St. Petersburg, FL 33713

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is:
1,000 shares authorized

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
JOHN T. WOODS, PRESIDENT
LORILIN WOODS, VICE PRESIDENT

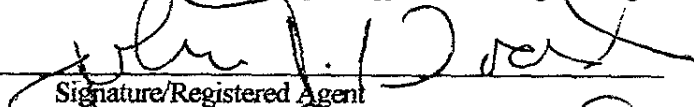
ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
JOHN T. WOODS
4834 7th AVE N.
St. Petersburg, FL 33713

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
JOHN T. WOODS
4834 7th AVE N.
ST. Petersburg, FL 33713

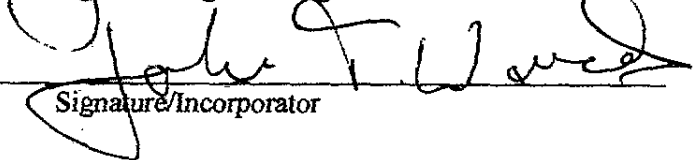
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

3/18/05

Date



Signature/Incorporator

3/18/05

Date

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TALLAHASSEE, FLORIDA