

P05000048853

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

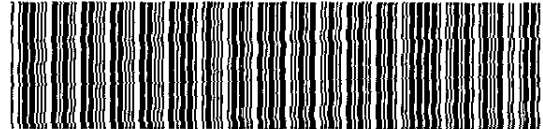
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

T. Burch APR 01 2005

TRANSMITTAL LETTER

ATX1

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

SUBJECT: JEFF SAVACOOOL WOODWORKING 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

ADDITIONAL COPY REQUIRED

FROM: JEFF SAVACOOOL
Name (Printed or typed)

10705 SE FEDERAL HWY #14
Address

HOBE SOUND FL 33455
City, State & Zip

772-214-0744
Daytime Telephone number

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

ARTICLE VI

NAME AND ADDRESS OF PRINCIPAL OFFICER AND PRESIDENT OF THE CORPORATION

JEFF SAVACOOOL
10705 SE FEDERAL HWY #14.
HOBE SOUND FL 33455

Jeff Savacool 3/25/05
SIGNATURE/PRINCIPAL OFFICER AND PRESIDENT DATE

ARTICLE VII

NAME AND ADDRESS OF VICE PRESIDENT OF THE CORPORATION

JEFF SAVACOOOL
10705 SE FEDERAL HWY #14
HOBE SOUND FL 33455

Jeff Savacool 3/25/05
SIGNATURE OF VICE PRESIDENT DATE

JEFF SAVACOOOL

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Jeff Savacool 3/25/05
SIGNATURE/ REGISTERED AGENT DATE