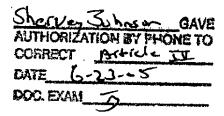
# 05000090057

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Jus 30877				

Office Use Only





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##78.75 - ##78.75

# TRANSMITTAL LETTER

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

SUBJECT:SLJ F	roperty Management Inc		
<del></del>	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	<ul><li></li></ul>	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy
		ADDITIONAL CO	& Certificate of Status
FROM:	Sherve	y Jackson	
-	Name (Printed or typed)		
	3472 Marston Dr Address		
	Orlando, Fl 32812 City, State & Zip		
	407-929-6630  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:

SLJ Property Management Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 3472 Marston Dr, Orlando, Fl 32812

### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Property and Real Estate Management

### ARTICLE IV SHARES

The number of shares of stock is: 100

## INITIAL OFFICERS AND/OR DIRECTORS

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

3472 Marston Dr Orlando, Fl 32812 Shervey L. Jackson: President / Owner

### REGISTERED AGENT ARTIÇLE VI

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Shervey Jackson 3472 Marston Dr Orlando, Fl 32812

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Shervey Jackson 3472 Marston Dr Orlando, Fl 32812

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this Date 5 6 20/0

Date certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity gistered Agent

Signature/Incorporator