

POS000108646

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

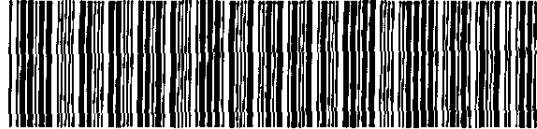
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/22/05--01023--004 **78.75

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2005 AUG -4 AM 8:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: AJS, 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: JACK Smith
Name (Printed or typed)

2875 NE 191st St., Suite 402
Address

Aventura, FL 33180
City, State & Zip

(305) 933-2569
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

July 25, 2005

JACK SMITH
2875 NE 191ST ST
STE 402
AVENTURA, FL 33180

SUBJECT: AJS, INC.
Ref. Number: W05000035275

We have received your document for AJS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is M16409 (A J S CORP.).

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Document Specialist
New Filings Section

Letter Number: 605A00048410

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATE REGISTRATION
TALLAHASSEE, FLORIDA

05 AUG -4 AM 11:10

RECEIVED

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: JAS Colony Corp.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 2875 NE 191st Street, Suite 402
Aventura, FL 33180

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Investments

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Alan M. Matus, President, 4000 Island Boulevard, Suite 301, Aventura, FL 33160
Jack Smith, Secretary-Treasurer, 2875 NE 191st St., Suite 402, Aventura, FL 33180

ARTICLE VI REGISTERED AGENT

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

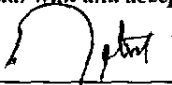
Alan M. Matus, 4000 Island Boulevard, Suite 301, Aventura, FL 33160

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Alan M. Matus, 4000 Island Boulevard, Suite 301, Aventura, FL 33160

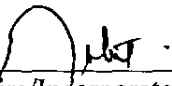
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

8-1-2005

Date



Signature/Incorporator

8-1-2005

Date

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA