## P05000112367

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)	·		
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Do	cument Number)			
Certified Copies	es Certificates of Status			
Special Instructions to	Filing Officer			
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Office Use Only



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## TRANSMITTAL LETTER

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

SUBJECT:		ling Corp			
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDESUFFIX)		
Enclosed are an orig	ginal and one (1) copy of the artic	eles of incorporation and	a check for:		
\$70.00	<b>\$78.75</b>	\$78.75	<b>□</b> \$87.50		
Filing Fce	Filing Fee	Filing Fee	Filing Fee,		
<b>~</b>	& Certificate of Status	& Certified Copy	Certified Copy		
			& Certificate of		
		ADDITIONAL CO	Status		
		ADDITIONAL CO	or a required		
FROM:	JON Wood				
	Name	(Printed or typed)	**************************************		
	102 (44 0-	d 415			
202 State Road 415					
	·				
	New Smyrna B	each El 3	32168		
	City,	State & Zip	72.00		
	407 466 4	-618 elephone number			
	Daytime i	etepnone number			

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

In compliance with Chapter 607 and/or Chapter 621	I, F.S. (Profit)			
ARTICLE I NAME The name of the corporation shall be: J. W	. Building	Corp	•	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	202 State New Smyraa	Road Beach	415 Florida	32168
ARTICLE III PURPOSE  The purpose for which the corporation is organized	is: - Construct	าอก		
ARTICLE IV SHARES The number of shares of stock is:			05 AUG SECRET TALLAH	
ARTICLE IV SHARES The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/O List name(s), address(es) and specific title(s):  JONATHAN D WOOD - Proposed States of the states of the share and Florida street address (P.O. Box NO. 1970 ATT   100 ATT	esident former		12 PM 1: 29 ANY OF STATE ASSEE, FLORIDA	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box No.  Jonathan D Wood 202  New Sm.	OT acceptable) of the regis State Road 415 Yrna Beach Fl	stered agent is	:	
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  202 SR 4	D Wood	tual o		
**************************************	process for the above stated con egistered agent and agree to ac	********** rporation at the t in this capacity	********* place designate	***** ed in this
Jonathan D Wood Signature/Registered Agent		8-5:	.05 ate	
Jonathan D Wrod Signature/Incorporator		8-5 D	-05	