P05000138701

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

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05 OCT 10 PH 2: 36

MEDIZ

COVER LETTER

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

SUBJECT: Jackson & Associates, Inc				
(PROPOSED CORPORATÉ NAME – MUST INCLUDE SUFFIX)				
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	l a check for:		
endicated and an ariginal and one (1/ copy of the deni-				
✓ \$70.00 □ \$78.75	\$78.75	\$87.50		
Filing Fee Filing Fee	Filing Fee	Filing Fee,		
& Certificate of Status	& Certified Copy	Certified Copy		
		& Certificate of		
	}	Status		
	ADDITIONAL CO	PY REQUIRED		
FROM: Deborah B. Jackson_				
Name	(Printed or typed)			
218 W 16th Street				
Address				
	200			
<u>Jacksonville, FL 322</u>				
City,	State & Zip			
904-894-8535				
·	elephone number			

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 30, 2005

DEBORAH B JACKSON 218 W 16TH STREET JACKSONVILLE, FL 32206

SUBJECT: JACKSON & ASSOCIATES, INC.

Ref. Number: W05000045167

We have received your document for JACKSON & ASSOCIATES, INC and your check(s) totaling \$70.00. 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.

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) 245-6879.

Ruby Dunlap Regulatory Specialist New Filings Section

Letter Number: 305A00059607

FILED SECRETARY OF STATE TALLAPASSEE FLORIDA

ARTICLES OF INCORPORATION

05 OCT 10 PM 2: 36

OF

JACKSON & ASSOCIATES BOOKKEEPING & TAX SERVICES, INC.

The undersigned do hereby associate for the purpose of becoming a corporation for profit under the laws of the State of Florida, and do hereby certify that the following Articles of Incorporation have been adopted:

ARTICLE I

The name of the corporation is JACKSON & ASSOCIATES BOOKKEEPING & TAX SERVICES, INC.

ARTICLE II

This corporation shall have perpetual existence and its existence shall commence on the date which these articles are filed.

ARTICLE III

This corporation is organized to engage in any and all lawful purposes, activity or business which corporations may be permitted under the laws of the United States and of the State of Florida; including but not in any way limiting its power, to buy, hold own, work, develop, improve, divide, subdivide, manufacture, process, sell, convey, lease mortgage, pledge, exchange and otherwise deal in and dispose of, on its own account or on commission, property of all kinds, real, personal, and mixed, including stocks, bond and securities issued or created by any other corporations in any state or county.

ARTICLE IV

The maximum number of shares of common stock that this corporation is authorized to issue and to have outstanding at any time is 5,000 shares, having a par value of One Dollar (\$1.00) per share.

ARTICLE V

The street address of the initial registered office of this corporation is 218 w 16th Street,

Jacksonville, FL 32206 and the name of the initial registered agent at that address is Deborah Jackson.

The principal office address and mailing address of this corporation is 218 W 16th Street, Jacksonville, FL 32206.

ARTICLE VI

The corporation shall have two (2) directors initially. The number of directors may be increased or decreased from time to time by majority vote of the shareholders, but shall never be less than (1). The name and address of the first Board of Directors who, subject to the provisions of these Articles of Incorporation, the Bylaws of this corporation and the laws of the State of Florida, shall hold office until their resignation, removal from office, or death, is as follows:

NAME ADDRESS

Deborah B. Jackson 218 W 16th Street, Jacksonville, FL 32206

Annie Scott 6164 Spirea Street E., Jacksonville, FL 32209

ARTICLE VII

The name and address of the incorporator is as follows:

NAME ADDRESS

Deborah Jackson P O Box 19673, Jacksonville, FL 32245

ARTICLE VIII

The officers of this corporation shall be a President, a Vice-President, a Secretary, a Treasurer and such other officers, agents and factors as shall be chosen in such manner, hold their offices for such terms and have such powers and duties as may be prescribed by the bylaws or determined by the Board of Directors. Any two or more offices may be held by the same person.

ARTICLE IX

The power to adopt, alter, amend of repeal bylaws shall be vested in the Board of Directors.

ARTICLE X

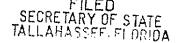
This corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation in the manner now or hereafter provided by law, and all rights conferred on shareholders herein are granted, subject to this reservation.

Deborah Jackson

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICLE FOR SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHO SERVICE OF PROCESS MAY BE SERVED.

Pursuant to Chapter 48.091, Florida Statutes, JACKSON & ASSOCIATES BOOKKEEPING & TAX SERVICES, INC. desiring to organize under the laws of the State of Florida, with its registered office, as indicated in the Articles of Incorporation, at the City of Jacksonville, County of DUVAL, State of Florida, has named Deborah Jackson located at 218 W 16th Street, Jacksonville, FL 32206, as its resident agent to accept service of process within this state.

ACKNOWLEDGEMENT



The undersigned having been named to accept service of process for the above page pm 2: 36 corporation, at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping my office open

Deborah Jakkson

STATE OF FLORIDA COUNTY OF DUVAL

BEFORE ME, personally appeared DEBORAH JACKSON, to me well known and known to me to be the individual described in and who executed the foregoing Certification of Registered Agent status, and acknowledged before me that she executed the same for the purposes herein expressed.

WITNESS my hand and official seal this 5th day of October, 2005.

Notary Public State of Florida

Lisa R. Falasco Commission #DD312337 Expires: Apr 30, 2008 Bonded Thru