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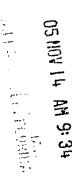
(R	equestor's Name)		
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(C	ity/State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			





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TRANSMITTAL LETTER

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

SUBJECT:	J.S. Co.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDESUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	13255 56	Printed or typed) Tee #	2
	MIAMI, FL.	33183 State & Zip	
-	305 383 - Daytime T	elephone number	

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 18, 2005

JONAN DIAZ 13255 SW 57 TER #2 MIAMI, FL 33183

SUBJECT: J.D. CO.

Ref. Number: W05000047581

We have received your document for J.D. CO. 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.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2006 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

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) 245-6962.

Letter Number: 605A00063293

Valerie Ingram Document Specialist New Filings Section

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Prof	it)
ARTICLE I NAME	·•
The name of the corporation shall be:	05 NOV 14 AM 9: 34
JOHAN CO	O. MILAUMSKE FLORIDA
ARTICLE II PRINCIPAL OFFICE	- 0111 <i>D</i> _F (
The principal place of business/mailing address is: 13255 Sw 57 Tan #2	
MIAMI FL. 33/83 ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
To conduct any Legal business	Activity within the State of F
ARTICLE IV SHARES The number of shares of stock is:	
250	
ARTICLE V INITIAL OFFICERS AND/OR DIRECT List name(s), address(es) and specific title(s):	<u>'ORS</u>
JONAN DIAZ (OWNER/ President)	
13255 SW 57 tre #17	
MiAmi, FL 33183	
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT acceptabl	e) of the registered agent is:
JONAN DIAZ	
13255 8W 57 TOR #Z	
MIAMI, FL. 33183	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	•
SAID MANOL	
	>
13255 SW 57 tre #3 MIAMI, FL, 33183	
*****************	***********
Having been named as registered agent to accept service of process for the certificate, I am familiar with and accept the appointment as registered agent	shove stated corporation at the place designated in this and agree to act in this capacity
	, ,
- Just To	10/4/05 Date
Signature/Registered Agent	[*] Date
V XX	colalac
Signature/Incorporator	Date