

PO6000057148

(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:

Office Use Only



600069831536

00012/06--01006--011 **78.75

FILED

06 APR 21 PM 2:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRP
4/21

6006-17496

TRANSMITTAL LETTER

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

SUBJECT: JIMMY SOD, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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:

JAMES MATTHEW MAN
Name (Printed or typed)

100 N.E. 6th AVENUE # 219
Address

HOMESTEAD, FLORIDA 33030
City, State & Zip

305 852 6078
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 12, 2006

JAMES MATTHEWMAN
100 N.E. 6TH AVENUE
#219
HOMESTEAD, FL 33030

SUBJECT: JIMMY SOD, INC.
Ref. Number: W06000017496

We have received your document for JIMMY SOD, 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.

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 Filing Section

Letter Number: 206A00024852

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:

~~JIMMY~~ ~~500, Inc.~~ corrected
JIMMY LANDSCAPE MAINTENANCE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

90174 OVERSEAS HWY #1
TAVERNIER, FLORIDA 33070

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

LAWN & LANDSCAPE MAINTANCE

ARTICLE IV SHARES

The number of shares of stock is:

TEN (10)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

JAMES MATTHEW MAN (PRESIDENT)
100 N.E. 6th AVE #219, HOMESTEAD, FL. 33030
OR
90174 OVERSEAS HWY #1 TAVERNIER, FL. 33070 (OFFICE)

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

JAMES MATTHEW MAN
100 N.E. 6th AVE #219
HOMESTEAD, FL. 33030
OFFICE: 90174 OVERSEAS HWY #1
TAVERNIER, FL. 33070

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAMES MATTHEW MAN
100 N.E. 6th AVE #219
HOMESTEAD, FL. 33070

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

Date

4/4/06

Signature/Incorporator

Date

4/4/06

FILED
06 APR 21 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA