

PD6000069255

(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



000074433100

05/15/06--01024--002 \*\*70.00

FILED  
06 MAY 15 AM 10:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
5/18

## COVER LETTER

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

SUBJECT: JIMENEZ STUCCO, 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: JIMENEZ STUCCO, INC

Name (Printed or typed)

3915 AVE Q, NW

Address

WINTER HAVEN, FL. 33881

City, State & Zip

863 738-1034

Daytime Telephone number

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

JOSE JIMENEZ

May 11, 2006

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

Dear Sir or Madam:

This letter is to attest to the fact that I am dissolving Jimenez Stucco, LLC, with Document # L04000019786 based on my accountant's advice. I am attaching articles for a new corporation and would like to keep my name and just change the designation to "INC" instead of "LLC".

My filing fee is attached. Please use this letter as my affidavit that I am the same person who owns Jimenez Stucco, LLC. Please advise if any questions other wise I would appreciate your prompt attention to this filing.

Thank you.

Sincerely,

Jose Jimenez  
President

*Jose Jimenez*

**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:

JIMENEZ STUCCO, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

3915 AVENUE Q, NW  
WINTER HAVEN, FL. 33881

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

JOSE JIMENEZ, PRESIDENT  
3915 AVE. Q, NW  
WINTER HAVEN, FL. 33881  
MARIA JIMENEZ, VP  
3915 AVE. Q, NW  
WINTER HAVEN, FL. 33881

**ARTICLE VI REGISTERED AGENT**

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

JOSE JIMENEZ, PRESIDENT  
3915 AVE. Q, NW  
WINTER HAVEN, FL. 33881

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

FLORIDA INSURANCE CONSULTING, INC.  
2161 CR 540A. #122  
LAKELAND, FL. 33813

\*\*\*\*\*

*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*

Jose Jimenez

Signature/Registered Agent

Donald Lopez

Signature/Incorporator

FILED

06 MAY 15 AM 10:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5-10-06

Date

5-10-06

Date