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C.J. 8-18

COVER LETTER

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

SUBJECT:	Dames	7 (2, 124,	P.A.
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	l a check for:
\$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of
		ADDITIONAL CO	Status
FROM:	James J	e (Printed or typed)	· · · · · · · · · · · · · · · · · · ·
	2898\$ Ver	Address	

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

293-9120 Daytime Telephone number

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
FILED
ARTICLE I NAME
The name of the corporation shall be:
FOR J GOSY, P.A. SECRETARY OF STATE
SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:
28985 Vermillion Lane
Bacta Springs, 71. 34/31
·
ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Any a all lawful Gusiness. Real tor
1/cal 101
ARTICLE IV SHARES
The number of shares of stock is:
(1)
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s), address(es) and specific title(s):
James J. Gray, President (VP)
1 1/ 1/ 1
$\frac{\mathcal{S}}{\mathcal{F}}$
APTICLE VI PEGISTERED AGENT
ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
28985 Vermillim Lane James J. Gray
GONITA Springs. If. 341341
ARTICLE VII INCORPORATOR
The <u>name and address</u> of the Incorporator is:
289 Er Vermillion La, Bon Sp- 7/34/30
289 & Vermillim ha, bon 5p- 77 34/34

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
9, /
f 1-0h
Signature/Registered Agent Date
81-06

Date