

P06000113452

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

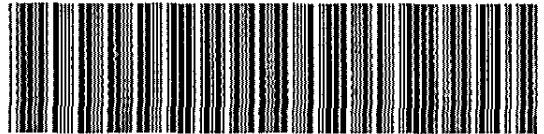
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2006 AUG 31 PM 2:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Burch AUG 31 2006

## TRANSMITTAL LETTER

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

SUBJECT: J. and N. Construction MANAGEMENT  
(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:

CARLOS NUÑEZ

Name (Printed or typed)

4912 LAKE HAVEN Blvd

Address

SEBING FL 33875

City, State & Zip

863 3814905

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 21, 2006

CARLOS NUNEZ  
4912 LAKE HAVEN BLVD  
SEBRING, FL 33875

SUBJECT: J. AND N. CONSTRUCTION MANAGEMENT  
Ref. Number: W06000036838

We have received your document for J. AND N. CONSTRUCTION MANAGEMENT and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 245-6928.

Tim Burch  
Document Specialist  
New Filing Section

Letter Number: 906A00051364

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06 AUG 31 PM 12:22

# 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:

J. and N. CONSTRUCTION MANAGEMENT INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4912 LAKE HAVEN Blvd  
SEBRING FL 33875

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONSTRUCTION MANAGEMENT

## ARTICLE IV SHARES

The number of shares of stock is:

1000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

JOSE QUINONES  
104 THAVSH AVE  
SEBRING FL 33870  
PRESIDENT

CARLOS NUNEZ  
4912 LAKE HAVEN Blvd.  
SEBRING FL 33875  
VICE-PRESIDENT

## ARTICLE VI REGISTERED AGENT

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

CARLOS NUNEZ  
4912 LAKE HAVEN Blvd.  
SEBRING FL 33875

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CARLOS NUNEZ  
4912 LAKE HAVEN Blvd.  
SEBRING FL 33875

\*\*\*\*\*  
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

Signature/Incorporator

Date

FILED

2008 AUG 31 PM 2:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8/16/04

8/16/04

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **J and N construction MANAGEMENT**
2. The name and address of the registered agent and office is:

(Name) **CARLOS NUNEZ**


(P.O. Box not acceptable)

**4912 LAKE HAVEN Blvd**

(City, State, Zip)

**SEBRING FL 33875**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designed in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

  
\_\_\_\_\_  
(Signature)