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(Requestor's Name)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: J. I. F. A. COMPANY
(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: JOSEFA FLORES
Name (Printed or typed)

3424 DARTFORD DR
Address

DAVENPORT FL 33837
City, State & Zip

(516) 805-7942
Daytime Telephone number

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

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.I.F.A. COMPANY

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3424 DARTFORD DR
DAVENPORT FL 33837

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PAINTING CO

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JOSEFA FLORES

PRESIDENT -

3424 DARTFORD DR
DAVENPORT FL 33837

ARTICLE VI REGISTERED AGENT

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

JOSEFA FLORES

3424 DARTFORD DR
DAVENPORT FL 33837

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

J.I.F.A. COMPANY Josefa Flores

3424 DARTFORD DR
DAVENPORT FL 33837

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

Josefa Flores

Signature/Registered Agent / Incorporator

09-08-06

Date

Signature/Incorporator

Date