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FILED SECRETARY OF STATE DIVISION OF CORPORATION

# **COVER LETTER**

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

<b>SUBJECT: JAX</b>	O2 Co.			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:	
□\$70.00	<b>√</b> \$78.75	\$78,75	<b>\$87.50</b>	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	
		a certifica copy	& Certificate of	
			Status	
		ADDITIONAL CO	PY REQUIRED	
FROM: Ni	chele McDonald			
Name (Printed or typed)				
4527 Princess Labeth Court				
Address				
	Jacksonville, Florida 32	2258		
-		State & Zip		
9	904-545-3103			
-	Daytime T	Celephone 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:

JAX 02 Ca.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4527 Princess Labeth Court Jacksonville, FL 32258

### 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:

100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

President- Nicole Wolfson, 963 Eagle Point Dr, St. Augustine, Florida 32092 Vice President- Nichele McDonald, 4527 Princess Labeth Ct, Jacksonville, FL 32258 Treasurer-Nichele McDonald, 4527 Princess Labeth Ct, Jacksonville, FL 32258 Secretary- Nicole Wolfson, 963 Eagle Point Dr, St. Augustine, Florida 32092

#### ARTICLE VI REGISTERED AGENT

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

Nichele McDonald 4527 Princess Labeth Court Jacksonville, Florida 32258

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Nichele McDonald 4527 Princess Labeth Court Jacksonville, Florida 32258

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

Nichtly

Signature/Incorporator

Date
11 | 2.5 | 06
Date

SECRETARY OF STATE OF STATE OF CORPORATIONS