# P080000011815

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	



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SECRETARY OF STATE
DIVISION OF CORPORATION

Office Use Only

EP 2/1/08

# **COVER LETTER**

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

SUBJECT: J 6	(Proposen Coppose	Ces, Inc. Atename – <u>Mustincl</u>	tine citeriy
	(FROFOSED CORFOR	TE NAME - MOST MCA	ODE SUFFIX
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	a check for:
<b>\$70.00</b>	\$78.75	\$78.75	<b>\$87.50</b>
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	
FROM:	loel Keene		
	Name	(Printed or typed)	
	421 S 11th Street		
·		Address	
	Lantana, FL 33462		
•	City	, State & Zip	**************************************
;	561-719-0779 or 561-5	86-8654	
•	Daytime 1	elephone number	<del></del>

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 & L Reprographic Services, Inc.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 421 S 11th Street
Lantana FI 33462

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Transaction of Any and All Lawful Business

### ARTICLE IV SHARES

The number of shares of stock is:

1000 shares

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

The name and address of the initial

director(s) of the Corporation, who shall hold

office until their successor is elected and

qualified or until his earlier resignation or

removal from office is:

Joel Keene 421 S 11th Street Lantana, FI 33462

Laurie Keene 421 S 11th Street Lantana, FI 33462

The number of directors may be increased or

decreased from time to time pursuant to the

by laws of the corporation, but shall never be

less than one.

OB JAN 31 AH 10: 55

### ARTICLE VI REGISTERED AGENT

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

421 S 11th Street Lantana, FI 33462

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Joel Keene 421 S 11th Street Lantana, FI 33462

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

Signature/Incorporator

Joel S. Keene