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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*

## COVER LETTER

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

SUBJECT: J.A. Fox Consulting, Inc.

(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: John A. Fox  
Name (Printed or typed)

741 NE Town Terrace  
Address

Jensen Beach FL 34957  
City, State & Zip

772 334-5957  
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. A. Fox Consulting, Inc.*

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

*741 N.E. Town Terrace  
Jensen Beach, Fl. 34957*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*Business Consulting*

**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):

*John A. Fox President/Secretary  
741 NE Town Ter.  
Jensen Beach, Fl. 34957*

**ARTICLE VI REGISTERED AGENT**

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

*Susie Fox  
741 NE Town Terrace  
Jensen Beach Fl. 34957*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*John A. Fox  
741 NE Town Ter.  
Jensen Beach Fl. 34957*

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

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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

*Susie Fox*

Signature/Registered Agent

*1/1/09*

Date

*John A. Fox*

Signature/Incorporator

*1/1/09*

Date