

P09000007684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

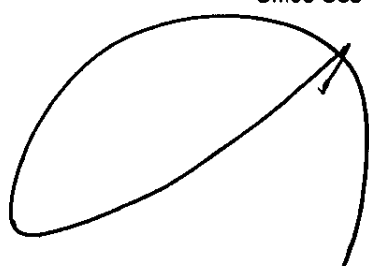
(Document Number)

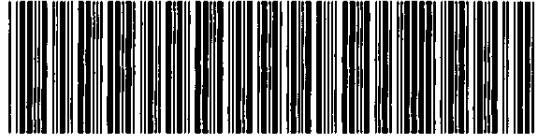
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

~~W09 1738~~

Office Use Only

 1/26 ✓



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01/12/09--01022--017 **78.75

2009 JAN 23 AM 8:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

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

SUBJECT: JSM ENTERPRISES, 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

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: J. STEPHEN McDANIEL
Name (Printed or typed)

4124 SETON CIRCLE
Address

PALM HARBOR, FL 34683
City, State & Zip

(727) 934-3395
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 13, 2009

J. STEPHEN MCDANIEL
4124 SETON CIRCLE
PALM HARBOR, FL 34683

SUBJECT: JSM ENTERPRISES, INC.
Ref. Number: W09000001738

We have received your document for JSM ENTERPRISES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P00000106447 - J.S.M. ENTERPRISES, INC..

Please return 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) 245-6934.

Loria Poole
Regulatory Specialist II

Letter Number: 309A00001269

RECEIVED
DEPARTMENT OF STATE
09 JAN 23 PM 1:43

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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:

~~JSA ENTERPRISES, INC.~~ JSM SURGICAL PRODUCTS, INC.

ARTICLE II PRINCIPAL OFFICE

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

4124 SETON CIRCLE
PALM HARBOR, FL 34683

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE SALES OF MEDICAL EQUIPMENT AND DEVICES
AND ALL OTHER LAWFUL PRODUCTS IN THE STATE OF FLORIDA.

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):

ARTICLE VI REGISTERED AGENT

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

J. STEPHEN McDANIEL
4124 SETON CIRCLE
PALM HARBOR, FL 34683

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

J. STEPHEN McDANIEL
4124 SETON CIRCLE
PALM HARBOR, FL 34683

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

J. Stephen McDaniel
Signature/Registered Agent
J. Stephen McDaniel
Signature/Incorporator

1/9/09
Date
1/9/09
Date

FILED
2009 JAN 23 AM 8:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA