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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EP 3/4/09

COVER LETTER

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

SUBJECT: J P Jimenez Incorporated

(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: Juan P Jimenez

Name (Printed or typed)

235 Center Street

Address

Naples, FL 34108

City, State & Zip

(440) 823-9313

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 P Jimenez Incorporated

ARTICLE II PRINCIPAL OFFICE

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

235 Center Street; Naples, FL 34108

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

One Thousand

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Juan P. Jimenez, President, Director
235 Center Street; Naples, FL 34108

ARTICLE VI REGISTERED AGENT

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

Juan P. Jimenez
235 Center Street; Naples, FL 34108


ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Juan P. Jimenez
235 Center Street; Naples, FL 34108

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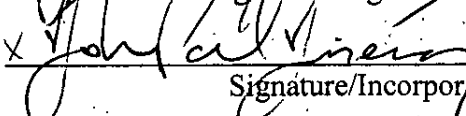
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

X 

Signature/Registered Agent

2/24/09

Date

X 

Signature/Incorporator

2/24/09

Date