

P09000043587

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

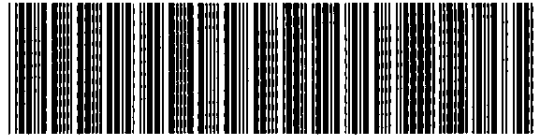
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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05/15/09--01010--020 \*\*87.50

FILED  
09 MAY 15 AM 8:10  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MRD  
5/19

# COVER LETTER

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

**SUBJECT:** Jack-Real 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 type="checkbox"/> \$78.75	<input checked="" type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status

**ADDITIONAL COPY REQUIRED**

FROM: Sam Jackson  
Name (Printed or typed)

**12450 NW 17 Ave**  
Address

**Miami, Fl. 33167**  
City, State & Zip

786.566.1614  
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

**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: Jack-Real Inc

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

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

12450 NW 17 Ave  
Miami, Florida 33167

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To engage in various services. Lawn Maint., landscaping, and tree cutting

**ARTICLE IV SHARES**

The number of shares of stock is:

100 shares

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Sam Jackson President  
12450 NW 17 Ave  
Miami, FL 33167

**ARTICLE VI REGISTERED AGENT**

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

Sam Jackson  
12450 NW 17 Ave.  
Miami, Florida 33167

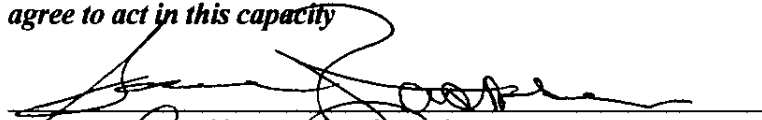
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Sam Jackson  
12450 NW 17 Ave  
Miami, Florida 33167

\*\*\*\*\*

*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

5-11-09  
Date  
5-11-09  
Date