

P09000076746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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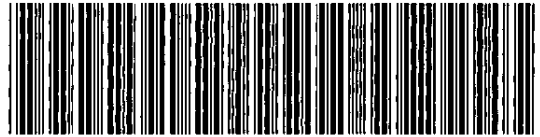
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09 SEP 14 PM 3:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EP 9/16/09

COVER LETTER

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

SUBJECT: J Thornton Group, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Jerry Thornton
Name (Printed or typed)

421 N. K Street
Address

Lake Worth, FL 33460
City, State & Zip

561-305-3528
Daytime Telephone number

jerthornton@gmail.com
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: J. Thornton Group, Inc.

ARTICLE II PRINCIPAL OFFICE

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

421 N. K ST, LAKE WORTH, FL 33460

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE CONSULTING SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

GERARD THORNTON, DIRECTOR

ARTICLE VI REGISTERED AGENT

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

GERARD THORNTON
421 N. K ST, LAKE WORTH, FL 33460

ARTICLE VII INCORPORATOR

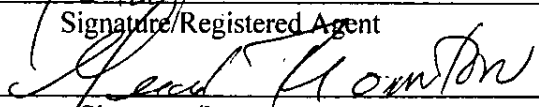
The name and address of the Incorporator is:

GERARD THORNTON
421 N. K. ST. LAKE WORTH, FL 33460

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

9/11/09

Date

9/11/09

Date

FILED
09 SEP 14 PM 3:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA