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# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number: 120000000257

: (850)224-8870

Fax Number

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\*\*Enter the email address for this business entity to be used for future. annual report mailings. Enter only one email address please.

Email	Address	

# FLORIDA PROFIT/NON PROFIT CORPORATION FLORIDA LEGAL SUPPORT GROUP, INC.

Certificate of Status	1
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Electronic Filing Menu

Corporate Filing Menu

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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:

FLORIDA LEGAL SUPPORT GROUP, INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 5640 INTERNATIONAL DR ORLANDO, FL 32819

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY & ALL LAWFUL BUSINESS

#### ARTICLE IV SHARES

The number of shares of stock is:

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): JANDERSON RAFAIEL 5306 MILLENIA BLVD #1201 ORLANDO, FL 32839 2010 FEB -9 AM 9: 58
SECRE PART OF STATES
TALL AREASES STREET

# ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: JANDERSON RAFAIEL 5306 MILLENIA BLVD #1201 ORLANDO, FL 32839

## ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: JANDERSON RAFATEL JRB MULTISERVICE INC 5308 MILLENIA BLVD #1201 ORLANDO, FL 32839

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Having been named as registered agent to accept service of process for the abo	ve stated corporation at the place designated in this
certificate, I am familiar with and acceptible appointment as registered agent and	agree to act in this capacity
	@18/19
Showthow Denistered Agent 1	Date
	/ /
	<u> </u>
Signature Incomporator	Date