

P10000102436

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

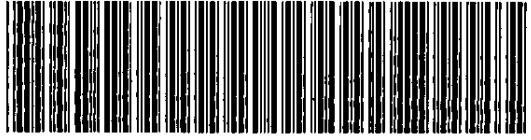
(Business Entity Name)

(Document Number)

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

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12/20/10--01028--016 \*\*87.50

FILED  
10 DEC 20 PM 4: 26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Ps 12/20/10

**COVER LETTER**

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

**SUBJECT: Kathan L Jones, 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 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM: Kathan L Jones**  
Name (Printed or typed)

**2664 Midland Terrace**  
Address

**The Villages, FL 32162**  
City, State & Zip

**804-399-9524**  
Daytime Telephone number

**kat.girl999@yahoo.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: Kathan L Jones, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
2664 Midland Terrace  
The Villages, FL 32162

Mailing address, if different is:  
7465 Mountain Lily Lane  
Mechanicsville, VA 23111

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Accounting services

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Kathan L Jones (president)  
Address: 2664 Midland Terrace  
The Villages, FL 32162

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

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ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED

**ARTICLE VI REGISTERED AGENT**

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

Name: Kathan L Jones  
Address: 2664 Midland Terrace  
The Villages, FL 32162

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Kathan L Jones  
Address: 2664 Midland Terrace  
The Villages, FL 32162

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

Kathan L Jones  
Required Signature/Registered Agent

12/15/2010  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Kathan L Jones  
Required Signature/Incorporator

12/15/2010  
Date