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(Requestor's Name)	
(Address)	6002000850
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PICK-UP WAIT MAIL	
(Business Entity Name)	
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COVER LETTER

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

UBJECT: RONAL JONES TIME. (PROPOSED CORPORATIONAME - MUST INCLUDE SUFFIX)	
nclosed are an original and one (1) copy of the articles of incorporation and a check for:	
\$70.00 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy & Certified Copy & Certificate of Status	
ADDITIONAL COPY REQUIRED	
FROM: Ronald Jones Name (Printed or typed)	
400 Daniel Stree	
Hastings, Fl 32145 City, State & Zip	N
904-669-8732 Daytime Telephone number	7
torijahnique@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 The name of the	NAME Ronald Jones, Inc corporation shall be:	
ARTICLE II	PRINCIPAL OFFICE	
	Principal street address	Mailing address, if different is:
	400 Daniel Street	P. O. Box 223
	Hastings, Fl 3214	Hastings, Fl 32145
ARTICLE III	PURPOSE	
	which the corporation is organized is:	
	Contracting	Topic Co
ARTICLE IV	v	HAPR 15
	nares of stock is:100	
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	TORS S
Name and	Title: Ronald Jones/ President	Name and Title: Tony Wesley Board Member
Address:	400 Daniel Street	Address: 112 W. Ashland Avenue
	Hastings, Fl 32145	Hastings, Fl 32145
Name and Title	Title: Anthony Jones/ Board Member	Name and Title:
Address:	202 W. Ashland Avenue	Address:
	Hastings, Fl 32145	
Name and Address:	Title:	
ARTICLE VI	REGISTERED AGENT	
	lorida street address (P.O. Box NOT acceptabl	e) of the registered agent is:
Name:	Sylvia Jones	
Address:	400 Daniel Street	
	Hastings, FL32145	<u> </u>
ARTICLE VII	_ INCORPORATOR	
	Iddress of the Incorporator is:	
Name:	Ronald Jones	
Address:	400 Daniel Street	
	Hastings, Fl 32145	<u> </u>
Having been nar	med as registered agent to accept service of pro agn familiar with and accept the appointment as	ocess for the above stated corporation at the place designal registered agent and agree to act in this capacity
$\Delta \Omega \Omega \Omega$	OF 10 M	4/14/11
X	Required Signature/Registered Agent	Date
U Submit this doc Socument to the I	ument and affirm that the facts stated herein Department of Sigre constitutes a third degree fo	are true. I am aware that the false information submitted elony as provided for in s.817.155, F.S.
	\mathcal{V}	
		4/14/11
	Required Signature/Incorporator	Date