

P1100057836

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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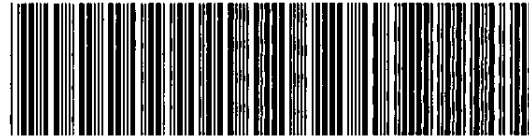
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/03/11--01012--014 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 OCT -3 PM 2:23

PS 10/6/11

COVER LETTER

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

SUBJECT: Judicial Alcohol Monitoring, 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

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

FROM: Roy Stevenson

Name (Printed or typed)

407 North Sinclair Avenue

Address

Tavares, Florida 32778

City, State & Zip

352 697 3275

Daytime Telephone number

judicialalcoholmonitoring@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)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 OCT -3 PM 2:25

ARTICLE I NAME

The name of the corporation shall be: Judicial Alcohol Monitoring, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
407 North Sinclair Avenue
Tavares, Florida 32778

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Any lawful business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Roy Stevenson/President
Address: 407 North Sinclair Avenue
Tavares, Florida 32778

Name and Title: David Norris/Vice-President
Address: 407 North Sinclair Avenue
Tavares, Florida 32778

Name and Title: Roy Stevenson/Secretary
Address: 407 North Sinclair Avenue
Tavares, Florida 32778

Name and Title: David Norris/Treasurer
Address: 407 North Sinclair Avenue
Tavares, Florida 32778

Name and Title:
Address:

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT

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

Name: Roy Stevenson
Address: 407 North Sinclair Avenue
Tavares, Florida 32778

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Roy Stevenson
Address: 407 North Sinclair Avenue
Tavares, Florida 32778

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



Required Signature/Registered Agent

9/30/11

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.



Required Signature/Incorporator

9/30/11

Date