

P11000092561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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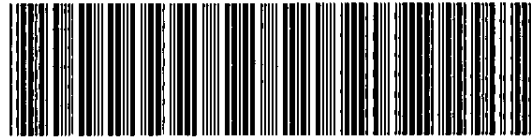
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/21/11--01001--012 **78.75

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2011 OCT 21 PM 4:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch OCT 24 2011

COVER LETTER

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

SUBJECT: J.A.M. OF COOPER CITY CONSTRUCTION SERVICES 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: MATTHEW CIAVARELLA
Name (Printed or typed)

9440 SW 51ST COURT
Address

COOPER CITY, FL 33328
City, State & Zip

954-914-6492
Daytime Telephone number

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.A.M. OF COOPER CITY CONSTRUCTION SERVICES INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
9440 SW 51ST COURT
COOPER CITY, FL 33328

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Conduct any and all lawful construction services in the state of Florida.

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Matthew Ciavarella	Name and Title: _____
Address: 9440 SW 51st Court	Address: _____
Cooper City, FL 33328	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

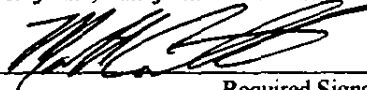
Name: **Matthew Ciavarella**
Address: **9440 SW 51st Court**
Cooper City, FL 33328

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Randall Williamson**
Address: **4540 SW 47th Terrace**
Davie, FL 33314

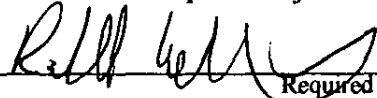
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

10-18-11
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

10/18/11
Date

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE