

P 11000093269

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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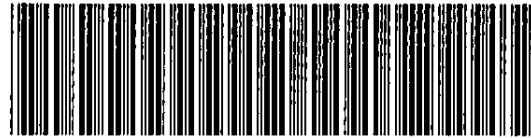
(Business Entity Name)

(Document Number)

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

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**FILED**  
2011 OCT 25 AM 10:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Stiles OCT 26 2011

## COVER LETTER

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

SUBJECT: **J S DESIGNS 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: **BONNIE SETZEKORN**

Name (Printed or typed)

**125 BRESSLER LN**

Address

**PALM COAST FL 32137**

City, State & Zip

**386-446-2378**

Daytime Telephone number

**JS DESIGNS@CFL.RR.COM**

E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

## ARTICLE I NAME

JS DESIGNS INC

The name of the corporation shall be:

## ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

125 BRESSLER LANE  
PALM COAST FL 32137

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MAKE FURNITURE AND OTHER HOME DECOR ITEMS

## ARTICLE IV SHARES

The number of shares of stock is 200

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: BONNIE SETZEKORN, PRESIDENT  
Address: 125 BRESSLER LN  
PALM COAST FL 32137

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

Name and Title: THOMAS H SETZEKORN VICE PRE  
Address: 125 BRESSLER LANE  
PALM COAST FL 32137

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

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: ARTHUR JACKSON  
Address: 1 FLORIDA PARK DR SOUTH  
PALM COAST FL 32137

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: BONNIE SETZEKORN  
Address: 125 BRESSLER LN  
PALM COAST FL 32137

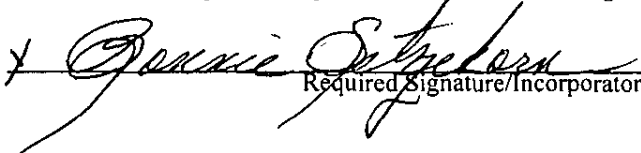
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

10/19/2011  
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

10/19/2011  
Date

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