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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch NOV 7 2011

COVER LETTER

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

SUBJECT: JDL INVESTIGATIONS, 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: LAZ GARCIA

Name (Printed or typed)

1199 NW 30TH AVENUE

Address

MIAMI, FL 33125

City, State & Zip

786-320-1057

Daytime Telephone number

LAZ.GARCIAPI@HOTMAIL.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:

JDL INVESTIGATIONS, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

11441 NW 34TH STREET
DORAL, FL 33178

Mailing address, if different is:

1199 NW 30TH AVENUE
MIAMI, FL 33125

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY & ALL LAWFUL BUSINESS

ARTICLE IV SHARES

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LAZ GARCIA - PRESIDENT

Address: 11441 NW 34TH STREET
DORAL, FL 33178

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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: GONZALO PEREZ

Address: 1197 NW 30TH AVENUE
MIAMI, FL 33125

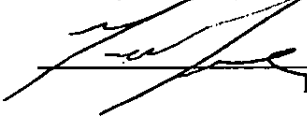
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LAZ GARCIA

Address: 11441 NW 34TH STREET
DORAL, FL 33178

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

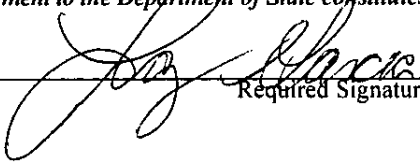


Required Signature/Registered Agent

10/27/11

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

10/27/11

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA