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(Re	equestor's Name)			
, · (Ac	ddress)			
, (Ac	ddress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	usiness Entity Nan	ne)		
(Do	ocument Number)			
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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SECRETARY OF STATE
ASION OF CORPORATIONS

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COVER LETTER

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

SUBJECT: J&N Auto Repair Inc.				
(PROPOSED CORPORAT	TE NAME – <u>MUST INCLUDE SUFFIX</u>)			
Enclosed are an original and one (1) copy of the artic	eles of incorporation and a check for:			
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status			
	ADDITIONAL COPY REQUIRED			
FROM: Jayson France Name	(Printed or typed)			
11817 Forest Mere Dr.				
A	ddress			
Bonita Springs FL 3413	State & Zip			
(239) 244-6363 Daytime Te	elephone number			
jnauto239@Comcast.net E-mail address: (to be used	for future annual report notification)			

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I The name of the con	NAME J&N Auto Repair Inc.		
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address		Mailing address, if different is:
. 2	8400 Old 41 Rd. Suite 10		Forest Mere Dr.
В	onita Springs FL		Springs FL
3	4135		
ARTICLE III	PITPPOSE		
	hich the corporation is organized is:		
Automobile R			
ARTICLE IV The number of shar		pe	
	tle: Jayson France		:Nicholas Sheckler
Address:	11817 Forest Mere Dr.	Address:	25315 Papillion Dr.
	Bonita Springs Fl		Bonita Springs FL
	34135		34135
	tle:		s:
Address:			
		<u> </u>	
		-	
	tle:		Đ:
Address:		Address:	
			12 × c
		_	SEC SEC
ARTICLE VI	<u>REGISTERED AGENT</u>		ECRE SIOH JAN
	rida street address (P.O. Box NOT acceptable) o		ent is: 25 PT F
Name:	Jayson France		그 유구다
Address:	11817 Forest Mere Dr		OF STATE OF AM II: 00
	Bonita Springs FL 34135	_	E GR
ARTICLE VII	INCORPORATOR		STATE (PRATII)
	ress of the Incorporator is:		6 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9
Name:	Jayson France	_	O,
Address:	11817 Forest Mere Dr.		
	Bonita Springs FL 34135	_	
Having heen name	ed as registered agent to accept service of proces	ss for the ahove st	ated cornoration at the place designated
	n familiar with and accept the appointment as reg		
//na	a Mul		1/23/2012
	Required Signature/Registered Agent		Date
		. -	
	ment and affirm that the facts stated herein are		
шкитені іодпе 1ж	epartment of State constitutes a third degree felon	ıy as proviaea jor i	n s.01/.133, F.S.
/hm	1 Krul		1/22/2012
-/ / / · · · · (Required Signature/Incorporator		1/23/2012 Date
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