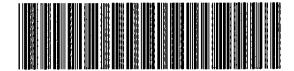
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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

1. States APR 2.4 2072

TRANSMITTAL LETTER

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

SUBJECT:	ROB JORGENSE (PROPOSED CORPORA)	EN INC. TE NAME – <u>MUST INCLU</u>	DE SÚFFIX)	
Enclosed is an origina	al and one(1) copy of the article	es 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:	ROBERT JOR Name (Pi	CENSEN inted or typed)		
	SECKE TARY OF STREET Address FORT MYERS, FL 33901 City, State & Zip 2012 APR 23 PM 1: 12			
	239-8	State & Zip 378 - 2459 Elephone number	PM 1: 32 OF STATE FLORIDA	

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: Rob Jorgensen, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 3847 Maxine Street

Fort Myers, FL 33901

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: The transaction of any and all lawful business for which corporations may be incorporated under the laws of Florida.

ARTICLE IV **SHARES**

The number of shares of stock is: One Thousand (1,000) at the par value of one dollar (\$1.00) each.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title (s):

REGISTERED AGENT **ARTICLE VI**

The name and Florida street address of the registered agent is:

Robert Jorgensen 3847 Maxine Street Fort Myers, FL 33901

INCORPORATOR

The name and address of the Incorporator is:

Robert Jorgensen 3847 Maxine Street Fort Myers, FL 33901

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.

Signature/Registered Agen

Date /20/12