

P120000065995

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

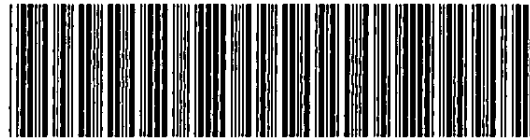
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

~~W12-37561~~

Office Use Only



200237390952

07/13/12--01018--015 **78.75

FILED

12 JUL 27 PM 2:24

SECRETARY OF STATE
RECEIVED
MONTGOMERY, ALABAMA

1/H

COVER LETTER

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

SUBJECT: Jackson Private Wealth Management, 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: Scott Jackson
Name (Printed or typed)

118 S Indian Cir
Address

Cocoa, FL 32922
City, State & Zip

3217941024
Daytime Telephone number

scottconradjackson@yahoo.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 16, 2012

SCOTT JACKSON
118 S INDIAN CIR
COCOA, FL 32922

SUBJECT: JACKSON PRIVATE WEALTH MANAGEMENT, INC.
Ref. Number: W12000037561

We have received your document for JACKSON PRIVATE WEALTH MANAGEMENT, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the name of the corporation for Article I.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 812A00018883

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: JACKSON PRIVATE WEALTH MANAGEMENT, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
118 S Indian Cir
Cocoa, FL 32922
US

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide financial planning services.

ARTICLE IV SHARES 100

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Scott Jackson, President/Treasurer
Address: 118 S Indian Cir
Cocoa, FL 32922

SECRETARY
Name and Title: _____
Address: _____

Cocoa, FL 32922

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: Scott Jackson
Address: 118 S Indian Cir
Cocoa, FL 32922

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Scott Jackson
Address: 118 S Indian Cir
Cocoa, FL 32922

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

 SCOTT C JACKSON
Required Signature/Registered Agent

7/9/12
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.

 SCOTT C JACKSON
Required Signature/Incorporator

7/9/12
Date

FILED
12 JUL 27 PM 2:25
SECRETARY OF STATE
TREASURY DIVISION
CORPORATION DIVISION