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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

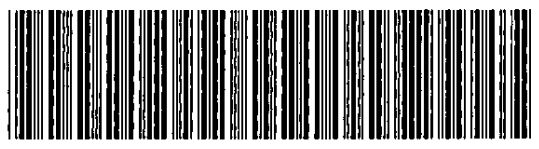
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

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08/10/12--01013--015 \*\*78.75

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12 AUG 10 PM 2:46  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS AND BUSINESSES

VH

**COVER LETTER**

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

**SUBJECT: J.E.F & ASSOCIATES CONSTRUCTION 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM: J.E.F & ASSOCIATES CONSTRUCTION INC**  
Name (Printed or typed)

**7871 SW 10TH CT SUITE B**  
Address

**NORTH LAUDERDALE, FL 33068**  
City, State & Zip

**954-880-7022**  
Daytime Telephone number

**JEF@ASSOCIATESCONSTRUCTIONINC@YAHOO.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** J.E.F & ASSOCIATES CONSTRUCTION INC  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
JUAN ELIAS FIGUEROA  
7871 SW 10TH CT STE B  
N. LAUDERDALE, FL 33068

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MAILING ADDRESS, IF DIFFERENT FROM THE ABOVE ADDRESS:  
STATE OF FLORIDA

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:  
REMODELING CONSTRUCTION SERVICES

**ARTICLE IV SHARES**  
The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: JUAN ELIAS FIGUEROA	Name and Title: _____
Address: 7871 SW 10TH CT SUITE B	Address: _____
N. LAUDERDALE, FL 33068	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

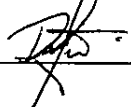
**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  
Name: JUAN ELIAS FIGUEROA  
Address: 7871 SW 10TH CT STE B  
NORTH LAUDERDALE, FL 33068


**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:  
Name: JUAN ELIAS FIGUEROA  
Address: 7871 SW 10TH CT STE B  
N. LAUDERDAEL, FL 33068

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  
08/06/2012  
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  
06/06/2012  
Date