

P12000082842

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

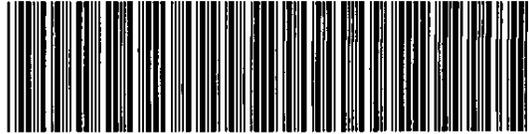
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
Joshua Brown **ONE**
AUTHORIZATION BY PHONE TO
CORRECT *Article IV*
DATE *10/1/12*
DOC. EXAM *MD*

Office Use Only



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09/28/12--01013--003 **70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 SEP 28 AM 11:44

FILED

MRS
10/1/12

COVER LETTER

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

SUBJECT: JMB CABINetry 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: Joshua M Brown
Name (Printed or typed)

17800 Medley Ave
Address

Springhill, FL 34610
City, State & Zip

727-534-3759
Daytime Telephone number

JBrown4486@Yahoo.com
E-mail address: (to be used for future annual report notification)

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

Joshua Matthew Brown

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: JMB CABINETS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address: 17800 Medley Ave, Spring Hill, FL 34610

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: installation and removal of cabinets

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ARTICLE IV SHARES

The number of shares of stock is: 500 shares of common stock, having a par value of One Dollar per share.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOSHUA M. BROWN
Address: President/Owner, 17800 Medley Ave, Spring Hill, FL 34610

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: JOSHUA M. BROWN
Address: 17800 Medley Ave, Spring Hill, FL 34610

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOSHUA M. BROWN
Address: 17800 Medley Ave, Spring Hill, FL 34610

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

9/26/12
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.

Required Signature/Incorporator

9-26-12
Date