

P120000101590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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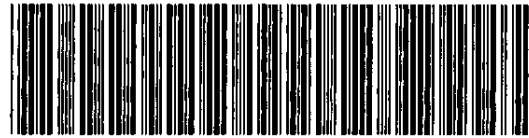
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE FLORIDA

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COVER LETTER

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

SUBJECT: J & Z Quality Home Repairs, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Jon Dalrymple

Name (Printed or typed)

1109-1 Monticello Lane

Address

Port Orange, Florida 32129

City, State & Zip

386-451-1006

Daytime Telephone number

tonya.omelia@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

The name of the corporation shall be: **J & Z Quality Home Repairs, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
1109-1 Monticello Lane
Port Orange, Florida 32129

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **Quality Home Repairs**

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jon Dalrymple, President
Address: 1109-1 Monticello Lane
Port Orange, Fl 32129

Name and Title: _____
Address: _____

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:

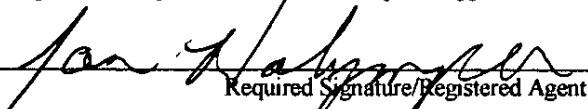
Name: Jon Dalrymple
Address: 1109-1 Monticello Lane
Port Orange, Florida 32129

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

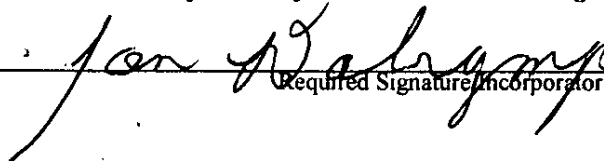
Name: Jon Dalrymple
Address: 1109-1 Monticello Lane
Port Orange, Florida 32129

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

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

Date

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