

P 13000011049

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

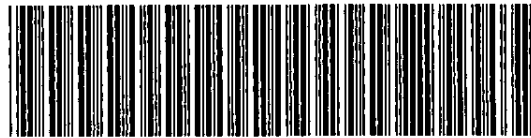
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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13 FEB - 1 PM 3:56

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FEB 1 2013
CORPORATIONS

ga 2/4/13

COVER LETTER

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

SUBJECT: JCB Property Services Company

(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: **Dana Baus**

Name (Printed or typed)

215 West College Avenue #1103

Address

Tallahassee, FL 32301

City, State & Zip

404-483-3229 Cell

Daytime Telephone number

danabaus@yahoo.com

E-mail address: (to be used for future annual report notification)

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

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RECEIVED
DIVISION OF CORPORATIONS
STATE OF FLORIDA

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: JCB Property Services Company

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

215 West College Avenue #1103 Tallahassee, FL 32301

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Business Consulting Services

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dana Baus, President and CEO

Name and Title: _____

Address 215 West College Avenue #1103

Address: _____

Tallahassee, FL 32301

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(conti.)

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: Dana Baus
Address: 215 West College Avenue #1103
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Dana Baus
Address: 215 West College Avenue #1103
Tallahassee, FL 32301

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

Dana Baus
Required Signature/Registered Agent

1/30/13
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.

Dana Baus
Required Signature/Incorporator

1/30/13
Date

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STATE
DEPARTMENT OF
CORPORATIONS