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(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

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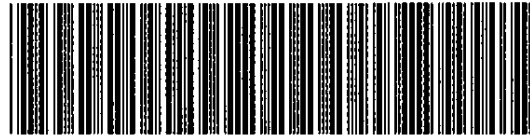
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: JACK RABBIT DELIVERIES, 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: Charles M. Novota

Name (Printed or typed)

1801 E. Jackson St.

Address

Pensacola, FL 32501

City, State & Zip

850-438-9102

Daytime Telephone number

chucknovota@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: JACK RABBIT DELIVERIES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1801 E. Jackson St.

Pensacola, FL 32501

Mailing address, if different is:

P.O. Box 88

Gulf Breeze, FL 32562

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: This corporation is organized for the purpose of transacting any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 7500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Charles M. Novota, President

Address: P.O. Box 88
Gulf Breeze, FL 32562

Name and Title: Joanie S. Novota, Vice Pres., Secretary

Address: P.O. Box 88
Gulf Breeze, FL 32562

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

(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: Joanie S. Novota
Address: 1801 E. Jackson St.
Pensacola, FL 32501

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Joanie S. Novota
Address: 1801 E. Jackson St.
Pensacola, FL 32501

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

Joanie S. Novota JOANIE S. NOVOTA 7.15.2013
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.

Joanie S. Novota JOANIE S. NOVOTA 7.15.2013
Required Signature/Incorporator Date