

P 13000071737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

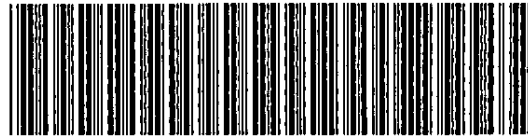
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
13 AUG 26 PM 3:33

8/29/13

COVER LETTER

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

SUBJECT: R & J Suncoast Properties 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: Janet Johns

Name (Printed or typed)

5359 Royal Poinciana Way

Address

North Port, FL 34291

City, State & Zip

734-216-3785

Daytime Telephone number

rjjohns60@comcast.net

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

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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: R & J Suncoast Properties Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different: **AUG 26 PM 3:33**

5359 Royal Poinciana Way
North Port, FL 34291

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To do any business within the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Janet Johns, President

Name and Title: Ryan Johns, Vice President

Address: 5359 Royal Poinciana Way
North Port, FL 34291

Address: 4000 Calatrava
North Port, FL 34287

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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: Janet Johns

Address: 5359 Royal Poinciana Way

North Port, FL 34291

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Janet Johns

Address: 5359 Royal Poinciana Way

North Port, FL 34291

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

Janet Johns
Required Signature/Registered Agent

8/21/13
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.

Janet Johns
Required Signature/Incorporator

8/21/13
Date

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