

P14000030167

(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:

Office Use Only



400258404514

04/02/14--01018--006 **87.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 APR -2 PM 3:05

KCO's
& CC 4/30/14

COVER LETTER

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

SUBJECT: **J & C Towing Services 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: **Jose D. Morales**

Name (Printed or typed)

2740 SE 15 Road

Address

Homestead, Florida 33035

City, State & Zip

305-305-4660

Daytime Telephone number

jctowingservices@hotmail.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 & C Towing Services, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2740 SE 15 Road

Homestead, Florida 33035

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Towing Services, Vehicle Removal

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jose D. Morales/President

Name and Title: _____

Address 2740 SE 15 Road

Address: _____

Homestead, Florida 33035

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 APR + 2 PM 3:05

(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: Jose D. Morales
Address: 2740 SE 15 Road
Homestead, Florida 33035

ARTICLE VII INCORPORATOR

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

Name: Jose D. Morales
Address: 2740 SE 15 Road
Homestead, Florida 33035

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

Jose D. Morales 3/25/14
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.

J D Morales 3/25/14
Required Signature/Incorporator Date