## P15000032805

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PICK-UP	☐ WAIT	MAIL
/Di	siness Entity Nam	0)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
Special instructions to		,
	ice Use Only	•



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410-15 CR

## **COVER LETTER**

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

and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$78.75 iling Fee Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	\$78.75 Iting Fee	iling Fee Filing Fee

FROM:	JAMES REINHEIMER
	Name (Printed or typed)
	345 CROSSWINDS DR
	Address
	PALM HARBOR, FL 34683
	City, State & Zip
	7275107443
	Daytime Telephone number
	JDREINHE@VERIZON.NET
	E-mail address: (to be used for future annual report notification)

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

-			IN
	ARTICLES OF INCO In compliance with Chapter 607 and	ORPORATION /or Chapter 621, F.S. (Profit)	(JOR Packaging IM) JDR PACKAGIN
ARTICLE I NA The name of the corpor	ME ation shall be JTS, INC.	DR. TNC.	JDR PACKAGING
ARTICLE II PR	INCIPAL OFFICE Principal street address		INC.
	BOR, FL 34683		
ARTICLE III PUI The purpose for which OF PACKAGIN	RPOSE THE CORPORATION IS ORGANIZED IS: NG SALES AND BROKERING	IGAGE IN EVEI G AND ANY LAWFU	RY ASPECT IL BUSINESS.
The number of shares o	ARES 100 Stock is: 100	<u>.s</u>	15 APR -9 PM 2: 31
Name and Tit	JAMES REINHEIMER, PRESIDENT & SECRETARY	Name and Title:	<b>P</b>
Address	345 CROSSWINDS DR. PALM HARBOR, FL		
	34683		
Name and Title	31	Name and Title:	
Address			
Name and Title Address	::	Name and Title:	
Addiess			

Name an	d Title:	Name and Title:
Address		Address:
ARTICLE VI The name and FI Name:	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of JAMES REINHEIMER	the registered agent is:
Address:	345 CROSSWINDS DR.	
	PALM HARBOR, FL 34683	
ARTICLE VII	INCORPORATOR	PP
The name and ac	dress of the Incorporator is:	Credity I
Name:	JAMES REINHEIMER	
Address:	345 CROSSWINDS DR	207
	PALM HARBOR, FL 34683	
	ned as registered agent to accept service of process on familiar with and accept the appointment as reg	for the above stated corporation at the place designated in stated agent and agree to act in this capacity
Can	nes Renhenon	3/10/15
	Required Signature/Registered Agent	Date
I submit this doc document to the I	nument and affirm that the facts stated herein are to Department of State constitutes a third degree felong Required Signature/Incorporator	rue. I am aware that the false information submitted in a as provided for in s.817.155, F.S.  23/10/15 Date
()		



## FLORIDA DEPARTMENT OF STATE Division of Corporations

RECURED

15 APR -9 AM 10: 40

SECHERAMI FRIME TALLAHASSES, FERBILA

March 30, 2015

JAMES REINHEIMER \*\*2ND MAILING\*\*\* 345 CROSSWINDS DR PALM HARBOR, FL 34683

SUBJECT: JTS, INC.

Ref. Number: W15000018469

We have received your document for JTS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Christine Haney Regulatory Specialist II New Filing Section

Letter Number: 415A00005242

15 APR -9 PM 2:31