

(Requestor's Name)					
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PICK-UP	☐ WAIT	MAIL MAIL			
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(Document Number)					
Certified Copies	Certificate	s of Status			
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## **COVER LETTER**

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

SUBJECT:	JOMAHK Construction, Inc.			
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )	
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d 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 CO	OPY REQUIRED	
FROM:	CORDON LAW OFFICES -		SQUIRE	
		e (Printed or typed)		
	333 140	Address		
	Miami, F	lorida 33127-1919		
	City	, State & Zip		
	Telephone: 305.759.2446	5 - Telefacsimile: 1.305.39	1.8042	
	Daytime 7	l'elephone number		
	cordonlaw	office@comcast.net		

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

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

**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:		JOMAHK Construction, Inc.		
ARTICLE II PRINCI	IPAL OFFICE Principal street address	М	lailing address, if different is:	
149 North	west 158Th Street		- N/A -	
Miami, Fl	orida 33169-6732			
RTICLE III PURPO The purpose for which the	SE e corporation is organized is:			
JOMAHK Con	struction, Inc. is organized for the pu	rpose of engaging in all a	spects of, and all phases of	
the construction	n industry.			
		).		
he number of shares of s	tock is:  LOFFICERS AND/OR DIRECTOR  Ernest BELIZAIRE President	<u> </u>	Bernard CONTE, Secretary	
	tock is:  LOFFICERS AND/OR DIRECTOR  Ernest BELIZAIRE President	<u>s</u>	Bernard CONTE, Secretary  10065 Northwest 8Th Avenue	
The number of shares of sh	L OFFICERS AND/OR DIRECTOR.  Ernest BELIZAIRE, President	<u>\$</u> Name and Title:_		
The number of shares of shares of shares of shares of share and Title:	L OFFICERS AND/OR DIRECTOR  Ernest BELIZAIRE, President  1160 Opa Locka Boulevard	<u>\$</u> Name and Title:_	10065 Northwest 8Th Avenue	
The number of shares of shares of shares of share and Title:	L OFFICERS AND/OR DIRECTOR  Ernest BELIZAIRE, President  1160 Opa Locka Boulevard	S Name and Title: Address:	Ste. No. 3  Miami, Florida 33150-1360	
The number of shares of sh	Ernest BELIZAIRE, President  1160 Opa Locka Boulevard  Miami, Florida 33168-6740	S Name and Title: Address:	Ste. No. 3  Miami, Florida 33150-1360	
The number of shares of sh	Ernest BELIZAIRE, President  1160 Opa Locka Boulevard  Miami, Florida 33168-6740  Marie France JEAN-GILLES, Vice	S           Name and Title:_           Address:           Name and Title:_           Address:	Ste. No. 3  Miami, Florida 33150-1360	
The number of shares of sh	Ernest BELIZAIRE, President 1160 Opa Locka Boulevard Miami, Florida 33168-6740  Marie France JEAN-GILLES, Vice 70 Northwest 189Th Terrace	S           Name and Title:_           Address:           Name and Title:_           Address:	Ste. No. 3  Miami, Florida 33150-1360	
The number of shares of sh	Ernest BELIZAIRE, President  1160 Opa Locka Boulevard  Miami, Florida 33168-6740  Marie France JEAN-GILLES, Vice 70 Northwest 189Th Terrace  Miami Gardens, Florida 33169-402	S           Name and Title:_           Address:           Name and Title:_           Address:	Ste. No. 3  Miami, Florida 33150-1360	
The number of shares of sh	Ernest BELIZAIRE, President  1160 Opa Locka Boulevard  Miami, Florida 33168-6740  Marie France JEAN-GILLES, Vice 70 Northwest 189Th Terrace  Miami Gardens, Florida 33169-402	Name and Title:  Address:  Pres.  Name and Title:  Address:  Address:  Address:	Ste. No. 3  Miami, Florida 33150-1360	

Name and	Title:	Name and Title:	
Address		Address:	
		<del>-</del>	
	<u>EGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable) o	of the registered agent is:	
Name:	RON CORDON, ESQUIRE	_	
Address:	335 Northwest 54Th Street		
	Miami, Florida 33127-1919		
ARTICLE VII I	NCORPORATOR		
The <u>name and add</u>	dress of the Incorporator is:		
Name:	Joseph ALCÉ,	<del></del>	
Address:	149 Northwest 158Th Street		
	Miami, Florida 33169-6732	_	
Effective date, if of (If an effective date) days after the filition.  Note: If the date is	cher than the date of filing:  -	ot be more than five business e statutory filing requirements,	
	ed as registered agent to accept service of proces on familiar with and accept the appointment as re		
///6	m (ordon		October 3/, , 2015
	Required Signature/Registered Agent		Date
	ment and affirm that the facts stated herein are epartment of Since constitutes a third degree felo		
<b>بر</b> سان	The Va		October <b>3</b> /, 2015
Require	ed Senature/Incorporator		Date