

# P/6000006226

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
JIM'S SUPPORT SERVICES, INC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 03      |
| Estimated Charge      | \$78.75 |

*01/25/16*

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January 22, 2016

FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
LAZARUS CORPORATE FILING SERVICE, INC.

SUBJECT: JIM'S SUPPORT SERVICES, INC  
REF: W16000004643

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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please list the city name in its entirety abbreviation is not acceptable.

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

Claretha Golden  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: E16000017437  
Letter Number: 816A00001462

P.O BOX 6327 - Tallahassee, Florida 32314

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

H16000017437

**ARTICLE I NAME:** The name of the corporation is:Jim's Support Services, Inc**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

4080 SW Balleto St Port St. Lucie  
FL 34953**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**James Comeau (P)  
4080 SW Balleto St  
Port St. Lucie, FL 34953**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

James Comeau  
4080 SW Balleto St  
Port St. Lucie, FL 34953**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:James Comeau  
4080 SW Balleto St  
Port St. Lucie, FL 34953FILED  
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Jan 21 16:11:31a

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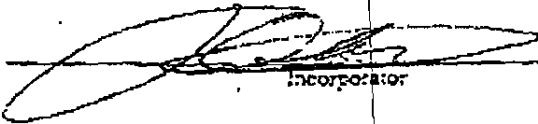
Required Signatures:

*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*

  
Registered Agent

1-21-16  
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.*

  
Incorporator

1-21-16  
Date

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