P16000027191

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	TIAW	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				





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SECRETARY OF STATE

MAR 2 8 2016

COVER LETTER

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

SUBJECT:	T: JADE FAMILY SERVICES, INC.				
	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an origina	l and one (1) copy of the articles of	incorporation and a check for	r:		
□ \$70.00 □ \$7 Filing Fee	8.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL COP	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM:	JEANNIE M WARD Name (Printed o	or typed)			
Address	2975 SW 90 TH ST				
· ——	OCALA, FL 34476	· · · · · · · · · · · · · · · · · · ·			
	City	, State & Zip			
	1-352-282-2602 Daytime	Telephone number			
	JEANNIEWARD03241	5@GMAIL.COM			

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

ARTICLES OF INCORPORATION

	In compliance w	vith Chapter 607 and/ or Chapter 621, F.S. (Profit)	450 M.
ARTICLE I	Name		THE RESERVE
The name of	the corporation shall be:	JADE FAMILY SERVICES, INC.	Months Section 19 19 19 19 19 19 19 19 19 19 19 19 19
ARTICLE II	Principal Office		
2975 SW	⁷ 90 [™] ST		
OCALA, I	FL 34476 .		
ARTICLE III	PURPOSE		
The purpose t	for which this corporation	is organized is to provide residential finish constru	uction services
to customers	under the proposed name	e of JADE FAMILY SERVICES, INC.	
ARTICLE IV	SHARES		
The number of	of shares of stock is:	100	
ARTICLE V	INITIAL OFFICERS AND	OR DIRECTORS	
Jacob L. Ward	l, President	and the second of the second o	
2975 SW 90TH	'ST	_	
OCALA, FL 34	476	_	
GARRETT T. V	WARD, VICE PRESIDENT		
11528 GWYN	FORD LN		
IACKSOW/III	ב בו פפפים		

JEANNIE M. WARD, TREASURER		
2975 SW 90 TH ST		
OCALA, FL 34476		
KAMI SMITH, SECRETARY		
749 ROYAL PALM AVE		
LADY LAKE, FL 32159		
ARTICLE VI REGISTERED AGENT		
NAME: <u>JEANNIE M. WARD</u>		
ADDRESS: <u>2975 SW 90TH ST</u>		
OCALA, FL 34476		
ARTICLE VII INCORPORATOR		
NAME: <u>JEANNIE M. WARD</u>		
ADDRESS: <u>2975 SW 90TH ST</u>		
OCALA, FL 34476		
Having been named as the 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.		
flannie M. Word 3/17/16		
REGISTERED AGENT DATE		

information submitted in a document to the Department of State constitutes a third degree felony as		
provided for in s.817.155, F.S.		
Jeannie m. Word	3/17/16	
SIGNATURE OF INCORPORATOR	DATE	

I submit this document and affirm that the facts stated herein are true. I am aware that the false