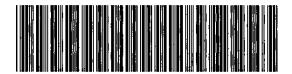


(Requestor's Name)		
(Ad	dress)	
(Address)		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
/Ru	siness Entity Nan	20)
(Bu	siness Entity Nan	ie)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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16 MAY 16 PH 12: 49
SECRETARIES SECRETARIES

MAL & BENEFIT

## **COVER LETTER**

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

## SUBJECT: JRS PARKING LOT MAINTANANCE INC (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	l a check for:	
■ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
<sub>FROM:</sub> <u>V</u>	lichael Ferraro C	PA e (Printed or typed)		
196 E. Nine Mile Rd Suite E				
Address				
Pensacola FL 32534				
and time rate.	City, State & Zip			
8	50-475-4100			
Daytime Telephone number				

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

mikeferrarocpa@yahoo.com

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)

The name of the corpora	TE tion shall be: JRS PARKING LO	OT MAINTANANCE INC
	<b>NCIPAL OFFICE</b> Principal <u>street</u> address	Mailing address, if different is:
7715 SABRA	DR	, <u>, , , , , , , , , , , , , , , , , , </u>
PENSACOLA	FL 32514	
ARTICLE III PUR The purpose for which t	POSE the corporation is organized is:	
to engage in a	any business or activity n	ot prohibited by law.
		Per <b>5</b>
		APRIL APPLICATION
		SSEE 6 - 10 - 12 1
		FE S 72
		DRIA L
ARTICLE IV SHA	IRES One	<b>75</b> * 1
The number of shares of	stock is:	
	IIAL OFFICERS AND/OR DIRECTOR	
Name and Title	CONRADO O BENITEZ JR	Name and Title: President
Address	7715 SABRA DR	Address:
	PENSACOLA FL 32514	
Name and Title:		Name and Title:
Address		_ Address:
	- Wayner	<u> </u>
Name and Title		Name and Title:
Address		
Address		Address:

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 CONRADO O BENITEZ JR	the registered agent is:
Address:	7715 SABRA DR	
, , , , , , , , , , , , , , , , , , , ,	PENSACOLA FL 32514	AS ₹
ARTICLE VII The name and ac Name: Address:	INCORPORATOR  Idress of the Incorporator is:  CONRADO O BENITEZ JR  7715 SABRA DR  PENSACOLA FL 32514	MAY 16 PH 12: 49  CALIARY OF STATE LAHASSEE FLORIDA
I submit this doc	Required Signature/Registered Lent	5   11   16  Date  true. I am aware that the false information submitted in a