

P21000098742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

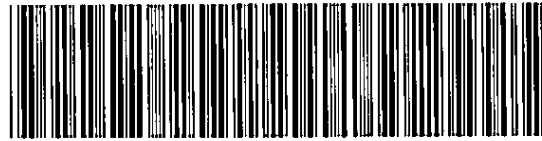
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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Office of Corporations
TALLAHASSEE, FLORIDA

FILED

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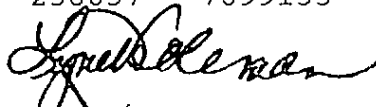
SEC. OF STATE
TALLAHASSEE, FL

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 258637 7699155

AUTHORIZATION :



COST LIMIT : \$ 70.00

ORDER DATE : November 19, 2021

ORDER TIME : 2:39 PM

ORDER NO. : 258637-005

CUSTOMER NO: 7699155

DOMESTIC FILING

NAME: JONES INDUSTRIES, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

COVER LETTER

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

SUBJECT: Jones Industries, Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Samantha T. Alexander

Name (Printed or typed)

Court Plaza South, 21 Main Street, Suite 200

Address

Hackensack, NJ 07601

City, State & Zip

201.373.2068

Daytime Telephone number

Salexander@pashmanstein.com

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

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

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

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ARTICLE I NAME

The name of the corporation shall be: Jones Industries, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

700 NE 16th
Ft Lauderdale, FL 33304

SECRETARY OF STATE
Mailing address, if different is: 33304 FL

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide construction services, including, without limitation,
general contracting, roofing, and construction management, and to do any and all acts and things which
maybe necessary, incidental or convenient in connection therewith.

ARTICLE IV SHARES

The number of shares of stock is: 900

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James W Jones – President

Name and Title: _____

Address 700 NE 16th

Address: _____

Ft Lauderdale, FL 33304

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Corporation Service Company

Address: 1201 Hays Street

Tallahassee, FL 32301

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DEPT. OF STATE
TALLAHASSEE, FL

FILED

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Samantha T. Alexander

Address: 21 Main Street, Suite 200

Hackensack, NJ 07601

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Eylina Bahor
Assistant Vice President

Required Signature/Registered Agent

11/19/2021

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.

Samantha Alexander

Required Signature/Incorporator

November 19, 2021

Date