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Document Number Only

C T CORPORATION SYSTEM
Requestor's Name
1311 Executive Center Drive, Ste. 200
Address
Tallahassee, Fla. 32301 (904) 656-8298
City State Zip Phone

CORPORATION(S) NAME

FILED
1995 FEB 22 PM 2:28
SECRET
TALLAHASSEE
100001412691
-02/22/95--01046--023
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J & R MANAGEMENT COMPANY

☒ Profit - ARTICLES

- | | | |
|--|---|---|
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of R.A. |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Fictitious Name |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> CUS / G/S |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input type="checkbox"/> After 4:30 |
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STATE OF FLORIDA
ARTICLES OF INCORPORATION
OF
J & R MANAGEMENT COMPANY

FILED
1995 FEB 22 PM 2:28
TALLAHASSEE
SECRETARY OF STATE

FIRST: THE CORPORATE NAME THAT SATISFIES THE REQUIREMENTS OF SECTION 607.0401 IS: J & R MANAGEMENT COMPANY

SECOND: THE ADDRESS OF THE PRINCIPAL OFFICE, AND THE MAILING ADDRESS OF THE CORPORATION IS: 2425 NORTH FEDERAL HIGHWAY, BOCA RATON, FLORIDA 33431

THIRD: THE NUMBER OF SHARES THE CORPORATION IS AUTHORIZED TO ISSUE IS: 10,000 (TEN THOUSAND) SHARES

*FOURTH: (a) IF THE SHARES ARE TO BE DIVIDED INTO CLASSES, THE DESIGNATION OF EACH CLASS IS:

N/A

(b) STATEMENT OF THE PREFERENCES, LIMITATIONS AND RELATIVE RIGHTS IN RESPECT OF THE SHARES OF EACH CLASS.

CLASS	PREFERENCES	LIMITATIONS	RELATIVE RIGHTS
N/A			

*FIFTH: (a) IF THE CORPORATION IS TO ISSUE THE SHARES OF ANY PREFERRED OR SPECIAL CLASS IN SERIES, THE DESIGNATION OF EACH SERIES IS:

N/A

(*Optional)

(b) STATEMENT OF THE VARIATIONS IN THE RELATIVE RIGHTS AND PREFERENCES AS BETWEEN SERIES INsofar AS THE SAME ARE TO BE FIXED IN THE ARTICLES OF INCORPORATION:

<u>SERIES</u>	<u>RELATIVE RIGHTS</u>	<u>PREFERENCES</u>
N/A		

(c) STATEMENT OF ANY AUTHORITY TO BE VESTED IN THE BOARD OF DIRECTORS TO ESTABLISH SERIES AND FIX AND DETERMINE THE VARIATIONS IN THE RELATIVE RIGHTS AND PREFERENCES BETWEEN SERIES.

N/A

SIXTH: PROVISIONS GRANTING PREEMPTIVE RIGHTS ARE:

N/A

SEVENTH. PROVISIONS FOR THE REGULATION OF THE INTERNAL AFFAIRS OF THE CORPORATION ARE:

N/A

EIGHTH: THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE OF THE CORPORATION IS C/O C T CORPORATION SYSTEM, 1200 SOUTH PINE ISLAND ROAD, CITY OF PLANTATION, FLORIDA 33324 AND THE NAME OF ITS INITIAL REGISTERED AGENT AT SUCH ADDRESS IS C T CORPORATION SYSTEM

*NINTH: THE NUMBER OF DIRECTORS CONSTITUTING THE INITIAL BOARD OF DIRECTORS OF THE CORPORATION IS TWO, AND THE NAMES AND ADDRESSES OF THE PERSONS WHO ARE TO SERVE AS DIRECTORS UNTIL THE FIRST ANNUAL MEETING OF SHAREHOLDERS OR UNTIL THEIR SUCCESSORS ARE ELECTED AND SHALL QUALIFY ARE:

✓ JEROME T. BUTWIN, 2425 N. FEDERAL HIGHWAY, BOCA RATON, FL. 33431
ROBIN ABEDON, 3215 SANTA BARBARA DRIVE, WEST PALM BEACH
FL. 33414-7267

SENT BY:CT CORP NYC BRANCH

: 2-22-95 :11:21AM : C T CORP NYC BRANCH-

CT CORPORATION: 4/ 7

TENTH: THE NAME AND ADDRESS OF EACH INCORPORATOR IS:

CONNIE BRYAN, C/C C T CORPORATION SYSTEM, 1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL. 33324

THE UNDERSIGNED HAS (HAVE) EXECUTED THESE ARTICLES OF INCORPORATION

THIS 22ND _____ DAY OF FEBRUARY _____, 19 95

Connie Bryan
SIGNATURE/TITLE

CONNIE BRYAN, INCORPORATOR

SIGNATURE/TITLE

SIGNATURE/TITLE

ACCEPTANCE BY THE REGISTERED AGENT AS REQUIRED IN SECTION
607.0501 (3) F.S: C T CORPORATION SYSTEM IS FAMILIAR WITH AND
ACCEPTS THE OBLIGATIONS PROVIDED FOR IN SECTION 607.0505.

DATED FEBRUARY 22ND , 19 95

BY

Connie Bryan
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1995 FEB 22 PM 2:29

FILED

CONNIE BRYAN

(TYPE NAME OF OFFICER)

SPECIAL ASSISTANT SECRETARY
(TITLE OF OFFICER)

