

P95000037836

TRANSMITTAL LETTER

FILED
95 MAY 11 AM 11:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: JDS Builders Inc.
(Proposed corporate name - must include suffix)

900001485819
-05/12/95--01049--012
****131.25 ****131.25

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

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: Dennis G Vinson
Name (printed or typed)

241 Woody Circle
Address

Molbaine, Fla, 32901
City, State & Zip

407-984-8518
Daytime Telephone number

PAK 5/12

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

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STATE
SECRETARY
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

JDS Builders Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

241 Woody Circle, Melbourne Beach, Fla.
32901

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ONE HUNDRED

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Dennis Vinson
241 Woody Circle
Melbourne Beach, Fla.
32901

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Dennis Gene Vinson - President

Bruce Vinson - TREASURER

241 Woody Circle,
Melbourne Beach, FL.

32901

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

9 day of MAY, 19 95.

Dennis Gene Vinson
Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

JDS Builders Inc

2. The name and address of the registered agent and office is:

Dennis Vinson
(NAME)

241 Woody Circle
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Melbourne Bch, Fla 32901
(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Dennis Vinson
(SIGNATURE)

5-9-95
(DATE)

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT: ONE THOUSAND STATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Gordon B. Mathison
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **795000037836**

1. Corporation Name

JOS Bu. Does Inc.

1996 REINSTATEMENT

Principal Place of Business

Mailing Address

**241 Woody circle Melbourne, Fla
32903**

APPROVED
AND
FILED

96 DEC -6 PM 4:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

300002024433--8
-12/10/96--01072--005
****225.00 ****225.00

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21. Suite, Apt. #, etc.		2b. 241 Woody circle Mel.		May 11 1995			
22. City & State		27. City & State		4. FEI Number		Applied For	
23. Zip		28. Zip		59-6045678		Not Applicable	
24. Country		29. Country		5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution		☐ \$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under s. 190.032, Florida Statutes		☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name **Bruce Vinson**
82 Street Address (P.O. Box Number is Not Acceptable)
241 Woody circle
83
84 City **Melbourne** FL 85 Zip Code **32901**

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE **Bruce Vinson** **Bruce Vinson** 8/22/96
Signature (Type or printed name of registered agent and the if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☒ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	Dennis Vinson	1.2 NAME	Bruce Vinson
STREET ADDRESS	241 Woody circle	1.3 STREET ADDRESS	241 Woody circle
CITY-ST-ZIP	Melbourne, FL 32901	1.4 CITY-ST-ZIP	Melbourne, FL 32901
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☒ Addition
NAME		2.2 NAME	John Vinson
STREET ADDRESS		2.3 STREET ADDRESS	500 N. Highway 1
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Industrie, FL 32901
TITLE	☐ DELETE	3.1 TITLE	☒ Change ☐ Addition
NAME		3.2 NAME	Dennis Vinson
STREET ADDRESS		3.3 STREET ADDRESS	500 N. Highway 1
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Industrie, FL 32901
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 19.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature of all have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Bruce Vinson** **Bruce Vinson** 8/22/96 407-984-85K
Signature (Type or printed name of signing officer or director) Date Daytime Phone