P 950000 60650

TRANSMITTAL LETTER

DEPARTMENT OF STATE Division of Corporations P O Box 6327 Tallahassee, Florida 32314

SUBJECT (1) JACKS - HOFFMAN INC.

Enclosed is an	original and	l one copy	of the	articles o	f incorpora	tion and a	Designation	and
Acceptance of I								

Please provide(16) a certificate of Status.

A check for (17) \$ 78,75 is enclosed. This represents payment for (18) filing the Acticles of Incorporation, filing Registered Agent Designation and a Certificate of Status.

(19) / H (signature)

(19) <u>CARMEN HOFFMAN</u> (print name)

(20) SECRETARY

(21) 5651 58711 WY N #310.0 KENNETH CITY, FL 33709

(22) (8:3) 544-2479 Daytime telephone number

This form has been completed with the assistance of

Name. Address

Telephone Number

ARTICLES OF INCORPORATION OF

(1) Jacks - Hoffman Inc.

ARTICLE L CORPORATE NAME

The name of this corporation is (1) Jacks Hoffman Inc.

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ARTICLE II. PRINCIPAL OFFICE.

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

(2) 5651 58TH WY N, #310-D, Kenneth City FL 33709

ARTICLE III. CAPITAL STOCK.

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

one time is (3) 3000

ARTICLE IV INITIAL REGISTERED AGENT AND OFFICE.

The name and address of the initial registered a mit are (4). Carmen Hoftman.

(5) 5651 5874 WYN , # 310 D , KENNETH CITY FL 33709

ARTICLE V INCORPORATORS

The name(s) and street address(es) of the incorporator(s) of these articles of incorporation are

(6) CARMEN HOFFMAN . (7) SEST 58 7 WY N # 310 D KENNETH CITY FL 33709

(8) MICHELLE JACKS . (9) 5651 58 M WY N # 310 D KENNETH (117 FL 33709

OPTIONAL PROVISIONS

The initial director(s) of this Corporation are	
(12) CARMEN HOFFMAN	
(13) MICHELLE JACKS	
(14) N/A	
The undersigned (has)(have) executed these Artic	les Of Incorporation on
(15) OI AUG 45	
	(signature) — Here (signature) (16) (title)
	(signature)
	(Ede) (signature)
	(10)

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Name Address Telephone Number

DESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of E.S. 607.0501, 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 (1) JACAS HOLLOWEN INC
- 2 The name of the registered agent is (4) CREMEN MOLLIMAN
- 3. The address of the registered agent registered office is

(5) 5651 58 " WY N # 310 D KENNETH CITY FL 33709

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and designated to accept service of processfor the above corporation. 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.

(4) L Heller Heller

141 CARMEN HOFFMAN

Date (23) 61 AUG 95

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