

P980000073644

TRANSMITTAL LETTER

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

SUBJECT: Z. S. and J Inc.
(Proposed corporate name - must include suffix)

400002621084--5
-08/20/98--01064--019
*****78.75 *****78.75

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: JAMES G. ALLEN
Name (Printed or typed)

8392 123 AVE N.
Address

LARGO, FL 33773
City, State & Zip

813-532-9297
Daytime Telephone number

FILED
98 AUG 20 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

AUG 21 1998

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Z. S. and J inc.

ARTICLE II PRINCIPAL OFFICE

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

8392 123 AVE North
Largo, FL 33773

ARTICLE III SHARES

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

100 (one hundred)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

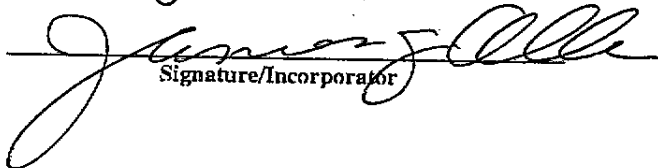
The name and Florida street address of the initial registered agent are:

James G. ALLEN
8392 123 AVE NORTH
LARGO, FL 33773

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

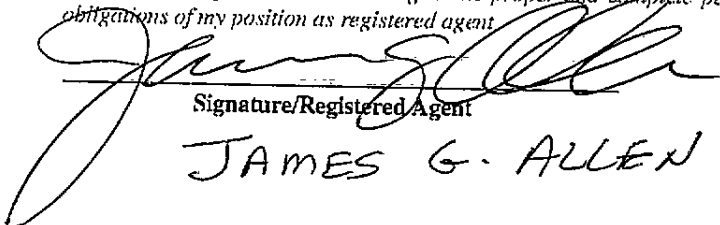
James G. ALLEN
8392 123 AVE NORTH
Largo, FL 33773


Signature/Incorporator

8-11-98
Date

(An additional article must be added if an effective date is requested.)

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.


Signature/Registered Agent
JAMES G. ALLEN

8-11-98
Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA