P9800009/052

98 OCT 25 MM 10: 57

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

SUBJECT: JACK RABBIT EXPRES I TNC.

(Proposed comorate name - must include suffix)

400002660604---2 -10/09/98--01068--015 ****131.25 *****87.50

	d one(1) copy of the article	es 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: Gina LEA!

Name (Printed or typed)

4505 10. Knollwood St.

Address

TAMPA FL 33614

City, State & Zip

1-813-249-0144

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 12, 1998

GINA LEAL 4505 W KNOLLWOOD ST TAMPA, FL 33614

SUBJECT: JACK RABBIT EXPRESS, INC

Ref. Number: W98000023155

We have received your document for JACK RABBIT EXPRESS, INC and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles of incorporation must be prepared in compliance with section 607.0202, Florida Statutes. Please refer to this section of the law.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6915.

Letter Number: 398A00050567

Pamela Hall Document Specialist

In compliance with Chapter 607, F.S., Florida Profit	FILED	
A DUDYCH F. BLABAE	98 OCT 28 AM 10: 5	
ARTICLE I NAME The name of the corporation shall be:	SECRETARY OF STATE	
JACK RABBIT EXPRESS, INC		
ARTICLE II PRINCIPLE OFFICE The principle place of business/mailing address is: 4505 W RNO Wood St.		
Tampa, FL 33614		
ARTICLE III SHARES The number of shares of stock is:	e e e e e e e e e e e e e e e e e e e	
100 shares	e e	
ARTICLE IV OFFICERS/DIRECTORS (OPTIONAL) The name(s) and address(es): appointed		
ARTICLE V REGISTERED AGENT The name and Florida street address of the registered agent GINA LEAL 4505 W KNOIWOOD THMPA, FL 33614	is:	
ARTICLE VI INCORPORATOR The name and address of the Incorporator is: GINA LEAL 4505 W LOOIWOD St TUMPA, FL 3364		
***************************************	***********	
I hereby accept the appointment as Registered Agent & agr	ee to act in this capacity.	
Sina Sed. Privided, Southery	10-20-98	
Signature/Registered Agent	Date	
This Lead, PRIsided, Secretary	10-20-98 Date	
Signature/Incorporator	Date	

ARTICLES OF INCORPORATION