### Florida Department of State

### Division of Corporations

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To:

Division of Corporations

Fax Number

: (850)922-4001

From:

: AL CLARK Account Name

Account Number : 072100000173

: (813)398-6011 Phone Fax Number : (813)397-5189

## FLORIDA PROFIT CORPORATION OR P.A.

J & M

Enterprises of the Suncoast, Inc.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 03      |
| Estimated Charge      | \$70.00 |

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#### 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.

#### ARTICLE I NAME

The name of the corporation shall be

#### J & M ENTERPRISES OF THE SUNCOAST, INC.

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#### ARTICLE II PRINCIPAL OFFICE

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

#### 8010 CROWN CIRCLE TAMPA, FL 33615

#### ARTICLE III SHARES

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

#### 1000 SHARES NO PAR

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

prepared by:

Name: JENNIFER P. CONWAY Address: 8010 CROWN CIRCLE

**TAMPA, FL,33615** 

Accounting & Tax Help, INC. 8668 PARK BLVD Suite .A SEMINOLE, Florida 33777

PH # 813-885-7158

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### 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):

Jennifer P. Conway 8010 Crown Circle Tampa, FL, 33615

| The un | dersigne  | d incorpora    | tor(s) has ( | (have) execute      | d these Articl   | es of Incorpor | ation this |
|--------|-----------|----------------|--------------|---------------------|------------------|----------------|------------|
| -      | 4拉        | _day of        | Janua        | ry                  | 19 <u>_</u> 99   | <del></del>    |            |
| •      | (An addir | tional article | e must be a  | added if an effi    | ective date is a | equested.)     |            |
|        |           |                |              |                     |                  |                |            |
|        |           | $\sim$         |              | 0.0                 |                  |                |            |
|        | X-        | Jens           | ufer         | P. Con<br>Signature | way              |                |            |
|        | , ,       | 0              | D            | Signature           |                  |                |            |
|        | -         |                |              | Signature           |                  |                | ,          |
|        |           |                |              |                     |                  |                |            |

Notarization is not required

Signature

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

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PHONE NO.: 7273975189

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, 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:

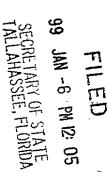
J&MENTERPRISES OF THE SUNCOAST, INC.

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

Accounting & Tax Help, INC. (Name)

8668 PARK BLVD., Suite A (P.O. Box not acceptable)

SEMINOLE, Florida 33777 (City/State/Zip)



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) DATE 1-4-99

PRESIDENT

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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