

TRANSMITTAL LETTER

P 9 9 0 0 0 0 1 2 9 9 4

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

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-02/08/99--01115--001
****236.25 *****78.75

cus

SUBJECT: Davie Jired, Inc.
(Proposed corporate name - must include suffix)

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: Edward S. Katz
Name (Printed or typed)

8392 State Road 84
Address

Davie, FL 33324

City, State & Zip

(954) 572-5436

Daytime Telephone number

FILED
FEB - 8 AM 10:48
99
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

F. CHESSEB FEB 01 1999

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

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:

Davie Jired, Inc.

ARTICLE II PRINCIPAL OFFICE

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

8392 State Road 84
Davie, FL 33324

ARTICLE III SHARES

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

100 shares common stock @1.00 par value per share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS


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

Edward S. Katz
3050 Sunrise Lakes Dr.E., Bldg. 2, , #106
Sunrise, FL 33322

ARTICLE V INCORPORATOR

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

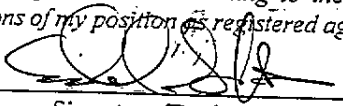
Edward S. Katz
3050 Sunrise Lakes Dr.E., Bldg.2, #106
Sunrise, FL 33322

✓ 
Signature/Incorporator

✓ 2/3/89
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

✓ 2/3/89
Date

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TALLAHASSEE, FLORIDA