OFFICALSE OF LYMPOCUMENT  LAZARUS CORPORATE FILING SERVICE, INC.  (Requestor's Name)  3320 S.W. 87th AVENUE  (Address)  (Address)  MIAMI, FLORIDA (305)552–5973  (City, State, Zip) (Phone #)  LOCAL REPRESENTATIVE TALLAHASSEE
OFFICE USE ONLY
COUPORATION NAMED OF
CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):
1. The Dollar Comments
(Corporation Name) (Document #)
2
(Corporation Name) (Document #)
(Corporation Name)
4.
(Corporation Name) (Document #)
A Walk in Pick we size 9
Mail out Will wait Photocopy Certificate of Status
NEW FILINGS AMENDMENTS
Profit Amendment (Amendment
NonProfit Resignation of R.A., Officer/Director
. Limited Liability Change of Registered Agent
Domestication Dissolution/Withdrawal
Other Merger
OTHER FILINGS REGISTRATION (4)
Annual Report QUALIFICATION
Fictitious Name Foreign
Troubous Wallie
Name Reservation   Limited Partnership   Reinstatement
Trademark
Other Examiner's Initials
CALCOST(7/92)



#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 1, 1999

**LAZARUS** 

MIAMI, FL

SUBJECT: J & J ENTERPRISES, INC.

Ref. Number: W99000004981

We have received your document for J & J ENTERPRISES, INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

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) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 599A00009264

# 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 | NAME

The name of the corporation shall be: J & M SALES, INC.

99 MAR -3 PH 12: 42
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

13245 SW 55 ST MIANI FlA 33175

### ARTICLE III SHARES

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

ONE HUMPLEP SHAPE

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

TUAN M. MILLIAN 12950 SW 1175T. MIAMI, Fla. 33186

### ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

JUAN M. MILLIAN 12950 SW 1175, MAMI, FLA 33175

## ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

President TOSE FELIU 13245 GW 55 ST, MANI, FL 33175 VICE PRESIDENT TUAN M. MILLIAN 12950 SW 1175T, MISMI, F/A 33186

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_ figure 19 99.

Signature

Signature

Articles of Incorporation Filing Fee - \$35

#### CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 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.

20 2 2 2 20 20 20 20 20 20 20 20 20 20 2		A	15 E
The name and address of the registered agent ar	nd office ie:		
JUAN M. MILLIAN	011100 13,		
(NAME)			<u> </u>
12950 SW 1175T	T		-
(P.O. BOX NOT ACCEPTABLE	<u>.                                    </u>	· · · · · · · · · · · · · · · · · · ·	
MIAMI FLORIDA 33186	•	. : "	
(CITY/STATE/ZIP)	<u> </u>	- ·	

PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS RECISTERED 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 LEGISTERED AGENT.

SIGNATURE

SIGNATURE

DATE

-25-99

DATE

**REGISTERED AGENT FILING FEE: \$35.00**