

P990000022413

TRANSMITTAL LETTER

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

700002796217--7
-03/05/99--01084--017
****122.50 *****78.75

SUBJECT:

JO'S NURSERY INC

(Proposed corporate name - must include suffix)

EFFECTIVE DATE
3-1-99

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:

DAVID BENEDICT

Name (Printed or typed)

707 67TH AVE W
Address

BRADENTON FL 34207
City, State & Zip

941-753-3434
Daytime Telephone number

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

99 MAR -5 AM 8:55

FILED

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

ajc
3/11

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:

JO'S NURSERY INC.

ARTICLE II PRINCIPAL OFFICE

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

1829 HANSEN ST
SARASOTA FL ~~34231~~ 34231

EFFECTIVE DATE
3-1-99

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JOANN KILCULLEN 1829 HANSEN ST
SARASOTA FL 34231

ARTICLE V INCORPORATOR

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

JOANN KILCULLEN 1829 HANSEN ST SARASOTA FL 34231
JAMES CAMPBELL 1829 HANSEN ST SARASOTA FL 34231

ARTICLE VI EFFECTIVE DATE 3-1-99

Joann Kilcullen
Signature/Incorporator

3-24-99
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

Joann Kilcullen
Signature/Registered Agent

3-24-99
Date

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

99 MAR -5 AM 8:55

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