Department of State Division of Corporations

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

SUBJECT:	Jimrich Enter	porate name - must include su	ffix)	- u.s.
		11	00002970 -08/26/990: *****78.75	7618 1037-001_ *****78.75
Enclosed is an orig	ginal and one(1) copy of the artic	les of incorporation and a	check for:	!
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM CO.		ADDITIONAL CO		99 AUG 26
CEIVED 326 AM 10:	SET GOCP O, Buen,	Address	EE, FLORI	

850-385-2203

Daytime Telephone number

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

Show A

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

The name of the corporation shall be:

Jimrich Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

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

2104-4 Gilliam Rd. Tallahassee, Fl. 32308

ARTICLE III SHARES

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

1000 Shared - Common

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

R.M.MECONSEY 3068 O'Brien 07.

Tallehassee, Fc. 32308

ARTICLE V INCORPORATOR

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

B.W.WECOLUCE 3068 O'Brien Br

Tallahassee, Fb-32308

Signature/Incorporator

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/Register Agent

Date