

P99000089039

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

SUBJECT:

JAMAR CABLING SYSTEMS INC.

(Proposed corporate name - must include suffix)

600003009816--8

-10/08/99--01061--001

*****78.75 *****78.75

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 of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

MARK M. SKOVRA

Name (Printed or typed)

326 WINTHROP BLVD WY E.

Address

TALLAHASSEE, FL 32307

City, State & Zip

850-656-8887

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 OCT -8 AM 11:12

APPROVED
AND
FILED

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

OK
8-10-99
2

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:

JAMAR CABLING SYSTEMS, INC.

ARTICLE II PRINCIPAL OFFICE

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

3413 REMINGTON RUN
TALLAHASSEE, FL 32312

ARTICLE III SHARES

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

1000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

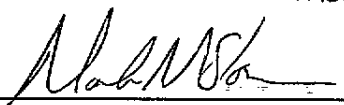
The name and Florida street address of the initial registered agent are:

JASON A. GOULD
3413 REMINGTON RUN
TALLAHASSEE, FL 32312

ARTICLE V INCORPORATOR

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

MARK M. SKOVERA
326 WHEATOLBINE WAY E.
TALLAHASSEE, FL 32301



Signature/Incorporator

10/8/99

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



Signature/Registered Agent

10-8-99

Date

APPROVED
AND
FILED
99 OCT -8 AM 11:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA