

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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1.3.245

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2025 JAN -2 PM 4:30

TALLAHASSEE, FL

FLORIDA PROFIT/NON PROFIT CORPORATION
JAMES CONTRACTORS GROUP, INC

Table with 2 columns: Item, Value. Rows include Certificate of Status (0), Certified Copy (1), Page Count (03), Estimated Charge (\$78.75)

25 JAN -2 AM 7:05

FILED
SECRETARY OF STATE

ARTICLES OF INCORPORATION  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I. NAME

The name of the corporation shall be: JAMES CONTRACTORS GROUP, INC.

ARTICLE II. PRINCIPAL OFFICE

Principal street address  
4528 ADDERTON AVE  
NORTH PORT, FL 34288

Mailing address, if different is:  
4528 ADDERTON AVE  
NORTH PORT, FL 34288

ARTICLE III. PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV. SHARES

The number of shares of stock is: 100

ARTICLE V. INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: HECTOR COLOMAR LOPEZ  
Address: PRESIDENT  
4528 ADDERTON AVE  
NORTH PORT, FL 34288

Name and Title: JESUS A. FERNANDEZ CACHON  
Address: VIC-PRESIDENT  
4528 ADDERTON AVE  
NORTH PORT, FL 34288

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

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CORPORATION

|                 |       |                 |       |
|-----------------|-------|-----------------|-------|
| Name and Title: | _____ | Name and Title: | _____ |
| Address         | _____ | Address:        | _____ |
|                 | _____ |                 | _____ |
|                 | _____ |                 | _____ |

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: HECTOR COLOMAR LOPEZ

Address: 4528 ADDERTON AVE  
NORTH PORT, FL 34288

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: HECTOR COLOMAR LOPEZ

Address: 4528 ADDERTON AVE  
NORTH PORT, FL 34288

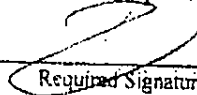
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 TALLAHASSEE, FLORIDA  
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**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
 (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)


Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
 \_\_\_\_\_  
 Required Signature/Registered Agent

01/02/2025  
 Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

  
 \_\_\_\_\_  
 Required Signature/Incorporator

01/02/2025  
 Date