



City of Belle Isle  
 Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811  
 Tel 407-581-8161 \* Fax 407-581-0313 \* [www.universalengineering.com](http://www.universalengineering.com)

## PERMIT CARD - PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 105.3.3: An enforcing authority may not issue a building permit for any building construction, erection, alteration, modification, repair or addition unless the permit either includes on its face or there is attached to the permit the following statement: "NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies." The issuance of this permit does not grant permission to violate any applicable City, Orange County, State of Florida and/or Federal codes and/or ordinances. Separate permits are required for Signs, Roofing, Electrical, Gas, Plumbing and Mechanical services. This permit becomes VOID if the work authorized is not commenced within 6 months, or is suspended or abandoned for a period of 6 months after commencement. **WORK SHALL BE CONSIDERED SUSPENDED IF AN APPROVED INSPECTION HAS NOT BEEN MADE WITHIN A 6 MONTH PERIOD.** PERMISSION IS GRANTED TO DO THE FOLLOWING WORK ACCORDING TO THE CONDITIONS HEREON AND THE APPROVED PLANS AND SPECIFICATIONS, SUBJECT TO COMPLIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE, FLORIDA.

**Scope of Work:** ELECTRICAL: illuminated channel sign

**Comments:** None

**Project Information**

Address: 5154 S. Conway Road, Belle Isle, FL 32812  
 Parcel ID: 17-23-30-0000-00-062  
 Property Owner: Belle Isle Commons LLC  
 Phone Number: 407-423-5400  
 \*\*\*\*\*  
 Company Name: J&K Investment Co of Orlando Inc  
 Contractor Name: Bowman, Jon  
 License Number: EC13002060  
 Address: 2722 10<sup>th</sup> Street, Orlando, FL 32820  
 Phone Number: 407-650-9939

**Permit Number: 2014-11-028**

Date of Application: 11/25/2013

Date Permit Issued: 12/04/2013

**WARNING TO OWNER:** "YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT." ON THE JOB INSPECTION(S) MUST BE MADE BEFORE PROCEEDING WITH SUBSEQUENT WORK. THIS CARD MUST BE DISPLAYED OUTSIDE AND BE PROTECTED FROM THE WEATHER WHILE BEING VISIBLE FROM THE STREET UNTIL THE FINAL INSPECTIONS HAVE BEEN APPROVED.

### BUILDING FEATURES

**IMPACT FEES**

School \$  
 Traffic \$

**ZONING FEES**

Zoning Fee \$

**UNIVERSAL ENG - BUILDING FEES**

Cert of Occ \$  
 Demo \$  
 Building \$  
 Fence \$  
 Driveway \$  
 Shed \$  
 Window(s) \$  
 Door(s) \$  
 PrePower \$  
 Electrical \$55.50  
 Temp Pole \$  
 Plumbing \$  
 Mechanical \$  
 Gas \$  
 Roofing \$  
 Boat Dock \$  
 Screen Encl \$  
 Swimming Pool \$  
 Sign \$

**SURCHARGE FEES**

Surcharge Fee \$2.00  
 Surcharge Fee \$2.00

**TOTAL FEES \$59.50**

Date Paid 12-5-13  
 CC or Check # 440372  
 Amount Paid 59.50

The person accepting this permit shall conform to the terms of the application on file and construction shall conform to the requirements of the Florida Building Code (FS 553).

**BUILDING INSPECTOR USE ONLY**

IF APPLICABLE:

Have Zoning Approval Conditions Been Met? YES NO Have Stormwater Approval Conditions Been Met? YES NO Silt fencing in place? YES NO Turbidity Barrier in place? YES NO

**BUILDING**

1<sup>st</sup> Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? \_\_\_\_\_ (Footing/Foundation)

2<sup>nd</sup> \_\_\_\_\_ (Slab)

3<sup>rd</sup> \_\_\_\_\_ (Lintel) (Wall Reinforcing on Masonry Building)

4<sup>th</sup> \_\_\_\_\_ (Exterior Framing) (Roof/Wall Sheathing)

5<sup>th</sup> \_\_\_\_\_ (Framing) (To be made after Plumbing/ Mechanical/ Electrical Rough-Ins & Windows/Doors Installed)

6<sup>th</sup> \_\_\_\_\_ (Insulation to be Made After Roof Installed)

7<sup>th</sup> \_\_\_\_\_ (Drywall)

8<sup>th</sup> \_\_\_\_\_ (Sidewalk/Driveway)

9<sup>th</sup> \_\_\_\_\_ (Other)

10<sup>th</sup> \_\_\_\_\_ (Final - After MEP and Other Applicable Finals)

**ROOFING**

1<sup>st</sup> ROOFING Deck Nailing/Dry-in/Flashing \_\_\_\_\_

2<sup>nd</sup> ROOFING Covering In-Progress \_\_\_\_\_

3<sup>rd</sup> ROOFING Covering Final \_\_\_\_\_

PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc...)

1<sup>st</sup> \_\_\_\_\_ (Underground) 2<sup>nd</sup> \_\_\_\_\_ (Sewer)

3<sup>rd</sup> \_\_\_\_\_ (Rough-In/Tub Set) 4<sup>th</sup> \_\_\_\_\_ (Final)

**CHECK APPROPRIATE BOX**

GAS  Natural  LP  MECHANICAL  ELECTRICAL  LOW VOLTAGE

1<sup>st</sup> \_\_\_\_\_ (Rough-In) 2<sup>nd</sup> \_\_\_\_\_ (Final)

Inspection requests are to be emailed to [BidScheduling@UniversalEngineering.com](mailto:BidScheduling@UniversalEngineering.com); a confirmation email will be sent back to you upon scheduling. Next-Day Inspection requests must be made by 1pm. Please include the following in your request: Permit #, project address, type of inspection, date of the requested inspection, a contact name & a contact phone number. AM or PM may be requested but cannot be guaranteed.

For a copy of your permit, or to check inspection results, please visit <https://universalengineering.sharefile.com/ff094edc4-832d-44bd-9809-ecf32f9e2e63>  
 login ID = [cobi@universalengineering.com](mailto:cobi@universalengineering.com) password = universal113



# City of Belle Isle

Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811  
Tel 407-581-8161 \* Fax 407-581-0313 \* [www.universalengineering.com](http://www.universalengineering.com)

**Received**  
11-25-13

## APPLICATION FOR ELECTRICAL PERMIT

**WARNING TO OWNER:** YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

DATE OF APPLICATION: \_\_\_\_\_ PERMIT NUMBER 2014-11-028  
The undersigned hereby applies for a permit to make electrical installations as indicated below. PLEASE PRINT

Project Address 5154 S. CONWAY RD., Belle Isle FL  32809  32812

Property Owner BELLE ISLE COMMONS LLC Phone 407-423-5400

Property Owner's Mailing Address P O BOX 568821 City ORLANDO

State FL Zip Code 32856 Parcel Id Number: 17-23-30-0000-00-062  
To obtain this information, please visit <http://www.ocpafl.org/Searches/ParcelSearch.aspx>

Class of Building: Old  New  Type of Building: Residential  Commercial  Other   
Type of Work: New  Alteration  Addition  Repair  Low Voltage New  Existing

Date First Inspection Desired: \_\_\_\_\_ or will call for inspection  Is power needed? Yes  No

### INDICATE THE QUANTITY OF ALL EQUIPMENT TO BE INSTALLED

Dishwasher \_\_\_\_\_ Exhaust Fan \_\_\_\_\_ Disposal \_\_\_\_\_ Water Heater \_\_\_\_\_  
Hood Fan \_\_\_\_\_ Dryer \_\_\_\_\_ Paddle Fan \_\_\_\_\_ Outlets \_\_\_\_\_  
Fixtures \_\_\_\_\_ Spa \_\_\_\_\_ Pool \_\_\_\_\_ Switches \_\_\_\_\_  
Electric Signs \_\_\_\_\_ Meter Reset \_\_\_\_\_ Low Voltage \_\_\_\_\_ Stoves \_\_\_\_\_  
Pumps \_\_\_\_\_ Motors \_\_\_\_\_ Air Conditioning (tons) \_\_\_\_\_ Furnace (KW) \_\_\_\_\_

Temporary Construction Pole \_\_\_\_\_ One (1) New Meter Service \_\_\_\_\_ Amperage/Voltage/Phase \_\_\_\_\_

Meter Service Upgrade from \_\_\_\_\_ to \_\_\_\_\_ Amperage/Voltage/Phase \_\_\_\_\_ Difference in Size \_\_\_\_\_

Relocate Existing Meter Service (No Service Size Change) \_\_\_\_\_

Other: HOOK UP SIGN TO EXISTING ELECTRICAL

PERMIT FEE BASED ON METER SERVICE SIZE SCHEDULE ..... \$ \_\_\_\_\_  
(IF NO METER SERVICE WORK BEING DONE, USE VALUATION OF JOB FOR PERMIT FEE)

VALUATION OF JOB (VALUATION OF ALL MATERIALS, LABOR, AND FIXTURES INSTALLED) \$ 50.00

Review & Permit Fee = \$ 56.50

3% FL Surcharge = \$ 4.00

TOTAL Permit = \$ 59.50

Building Official: M. Kelly Buiss Date 12-03-2013

I hereby certify that the above is true and correct to the best of my knowledge.

I hereby make Application for Permit as outlined above, and if same is granted I agree to conform to all Florida Building Code Regulations and City Ordinances regulating same and in accordance with plans submitted. The issuance of this permit does not grant permission to violate any applicable Town and/or State of Florida codes and/or ordinances.

LICENSE HOLDER SIGNATURE Jon H Bowman LICENSE # EC13002060

LICENSE HOLDER NAME JON H'BOWMAN COMPANY NAME J & K INVESTMENT CO OF OR

Street Address 2722 10TH STREET

City ORLANDO State FL Zip Code 32820 Phone Number 407-650-9939

NOTE: The Building Permit Number is required if the Electrical Installation is associated with any construction or alteration where a Building Permit has been issued.

Building Permit Number 2014-11-027

CITY OF BELLE ISLE  
Permit Application Review Sheet

Permit Number	2014-11-028
Property Owner	Belle Isle Commons
Address	5151 S. Conway Rd
Nature of Improvement	Electrical
Received Application	11-25-13
Sent for Stormwater Review	/
Stormwater Approved	/
Sent for Zoning Review	/
Zoning Approved	/
Applied for Variance	/
Variance Approved	/
Sent to BO for Review	11-26-13
Building Official Approved	12-03-2013
Comments	
1.	11-26-13 eq Sent sign permit to COBEI for reviews
2.	12-4-13 eq emailed Luis
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	

Searches Sales Search Property Record Card My Favorites Sign up for e-Notify

**5120 Conway Rd** 4-17-23-30-0000-00-062 >

Physical Street Address  
 Belle Isle Commons LLC  
 5120 Conway Rd  
 Property Name  
 Belle Isle Commons  
 Postal City and Zipcode  
 Orlando, FL 32812  
 Mailing Address On File  
 Property Use  
 1600 - Community Shopping  
 Po Box 516921  
 Orlando, FL 32856-8821  
 Municipality  
 Belle Isle  
 302317000000062 01/13/2011

Values, Exemptions and Taxes Property Features Sales Analysis Location Info Market Stats Update Information

**Property Description**  
 BEG 225.14 FT W & 50 FT N OF SE COR OF SW1/4 OF SEC 17-23-30 TH RUN W 430.17 FT N 732.63 FT E 204.44 FT S 145.15 FT E 400 FT S 187.31 FT W 172.24 FT S 400.41 FT TO POB

Total Land Area 314,646 sqft (+/-) | 7.22 acres (+/-) GSI Calculated Notice

Land Use Code	Zoning	Land Units	Unit Price	Land Value	Class Unit Price	Class Value
1600 - Community Shopping	C-1	314646 SQUARE FEET	\$8.50	\$2,674,491	\$0.00	\$2,674,491

Page 1 of 1 (1 total records)

**Buildings**

Important Information		Structure	
	<b>Model Code:</b> 04 - Commercial	<b>Actual Year Built:</b> 1981	<b>Gross Area:</b> 7367 sqft
	<b>Type Code:</b> 1600 - Community Shopping	<b>Living Area:</b> 0	<b>Living Area:</b> 6445 sqft
	<b>Building Value:</b> \$249,449	<b>Baths:</b> 0.0	<b>Exterior Wall:</b> Concrete/Cinder Block
	<b>Estimated New Cost:</b> \$435,719	<b>Floors:</b> 1	<b>Interior Wall:</b> Drywall
	<b>Model Code:</b> 04 - Commercial	<b>Actual Year Built:</b> 1981	<b>Gross Area:</b> 12012 sqft
	<b>Type Code:</b> 1100 - Stores, 1 Story	<b>Living Area:</b> 0	<b>Living Area:</b> 10252 sqft
	<b>Building Value:</b> \$312,979	<b>Baths:</b> 0.0	<b>Exterior Wall:</b> Concrete/Cinder Block
	<b>Estimated New Cost:</b> \$546,689	<b>Floors:</b> 1	<b>Interior Wall:</b> Drywall
	<b>Model Code:</b> 04 - Commercial	<b>Actual Year Built:</b> 1981	<b>Gross Area:</b> 11375 sqft
	<b>Type Code:</b> 1100 - Stores, 1 Story	<b>Living Area:</b> 0	<b>Living Area:</b> 9052 sqft
	<b>Building Value:</b> \$299,119	<b>Baths:</b> 0.0	<b>Exterior Wall:</b> Concrete/Cinder Block
	<b>Estimated New Cost:</b> \$522,479	<b>Floors:</b> 1	<b>Interior Wall:</b> Drywall
	<b>Model Code:</b> 04 - Commercial	<b>Actual Year Built:</b> 1981	<b>Gross Area:</b> 3720 sqft
	<b>Type Code:</b> 1600 - Community Shopping	<b>Living Area:</b> 0	<b>Living Area:</b> 3200 sqft
	<b>Building Value:</b> \$1,09,899	<b>Baths:</b> 0.0	<b>Exterior Wall:</b> Concrete/Cinder Block
	<b>Estimated New Cost:</b> \$1,91,963	<b>Floors:</b> 1	<b>Interior Wall:</b> Drywall
	<b>Model Code:</b> 04 - Commercial	<b>Actual Year Built:</b> 1981	<b>Gross Area:</b> 38972 sqft
	<b>Type Code:</b> 1600 - Community Shopping	<b>Living Area:</b> 0	<b>Living Area:</b> 34665 sqft
	<b>Building Value:</b> \$1,233,608	<b>Baths:</b> 0.0	<b>Exterior Wall:</b> Concrete/Cinder Block
	<b>Estimated New Cost:</b> \$2,154,773	<b>Floors:</b> 1	<b>Interior Wall:</b> Drywall

Page 1 of 2 (7 total records)

**Extra Features**

Description	Date Built	Units	XFOB Value
PKSP - Parking Space	01/01/1981	240 Unit(s)	\$1,20,000
PKSP - Parking Space	01/01/1981	17 Unit(s)	\$8,500
PT3 - Patio 3	01/01/2005	1 Unit(s)	\$4,000
OSB1 - Standard Open Stg Bin	01/01/2005	1 Unit(s)	\$1,000
PVAS - Pav Asph	01/01/1981	42000 Square Feet	\$84,000
PVCN - Pav Con	01/01/1981	6700 Square Feet	\$203,100
WADC - Wall Dec	01/01/1981	700 Unit(s)	\$14,000

Page 1 of 1 (7 total records)

This Data Printed on 10/29/2013 and System Data Last Refreshed on 10/28/2013

Site Notice • About Us • Contact Us • OCPAF1 Home • Property Search  
 Orange County Property Appraiser • 200 S Orange Avenue, Suite 1700 • Orlando, FL 32801  
 Office Hours: 8:00 a.m. to 5:00 p.m. Monday • Friday • Phone: 407.836.5044  
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11/2:1  
 38.25 sq. ft.  
 Legacy Chiropractor.

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
12/04/2013

**THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.**

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> McLain Pierce & Associates 720 S. Park Avenue Sanford, FL 32772	<b>CONTACT NAME:</b> Amanda Meadows <b>PHONE (A/C, No., Ext):</b> 407-323-8142 <b>FAX (A/C, No.):</b> 407-321-4292 <b>E-MAIL ADDRESS:</b> _____
<b>INSURED</b> J & K Investment Company of Orlando, Inc 2722 10th Street Orlando, FL 32820	<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A: Markel Insurance Company <b>NAIC #</b> 38970 INSURER B: Lloyd's of London INSURER C: Rockhill Insurance Company <b>13023</b> INSURER D: INSURER E: INSURER F:


**COVERAGES**      **CERTIFICATE NUMBER:**      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF. (MM/DD/YYYY)	POLICY EXP. (MM/DD/YYYY)	LIMITS
<b>B</b>	<b>GENERAL LIABILITY</b>		<b>BOORL2495</b>	<b>08/15/13</b>	<b>08/15/14</b>	EACH OCCURRENCE \$ <b>1,000,000</b>
	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b>	<input type="checkbox"/> <b>CLAIMS-MADE</b> <input type="checkbox"/> <b>OCCUR</b>				ADVANCE TO RENTED PREMISES (Per Occurrence) \$ <b>100,000</b>
						MED EXP (ADV. one person) \$ <b>10,000</b>
						PERSONAL & ADV INJURY \$ <b>1,000,000</b>
<b>GEN'L AGGREGATE LIMIT APPLIES PER:</b>						
	POLICY	PER				GENERAL AGGREGATE \$ <b>2,000,000</b>
	LOC					PRODUCTS - COMP/OP AGG \$ <b>2,000,000</b>
<b>AUTOMOBILE LIABILITY</b>						
	ANY AUTO ALL OWNED AUTOS					COMBINED SINGLE LIMIT (Per accident) \$
	HIRED AUTOS					BODILY INJURY (Per person) \$
	SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>						
<b>C</b>	<b>UMBRELLA LIAB</b>	<input checked="" type="checkbox"/> <b>OCCUR</b>	<b>RXSLWGR000702-00</b>	<b>08/15/13</b>	<b>08/15/14</b>	EACH OCCURRENCE \$ <b>1,000,000</b>
	<b>EXCESS LIAB</b>	<input type="checkbox"/> <b>CLAIMS-MADE</b>				AGGREGATE \$ <b>1,000,000</b>
	DED	RETENTION \$				
<b>A</b>	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>	<input type="checkbox"/> <b>Y/N</b>	<b>MWC0037243</b>	<b>08/15/13</b>	<b>08/15/14</b>	<input checked="" type="checkbox"/> <b>WC STATUS-TORY LIMITS</b> <b>OTH-ER</b>
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/>				<b>E.L. EACH ACCIDENT</b> \$ <b>500,000</b>
		<b>N/A</b>				<b>E.L. DISEASE - EA EMPLOYEE</b> \$ <b>500,000</b>
						<b>E.L. DISEASE - POLICY LIMIT</b> \$ <b>500,000</b>

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CANCELLATION

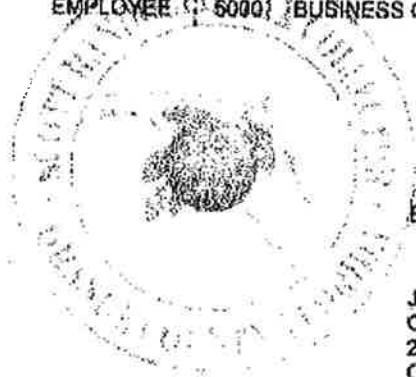
<b>CERTIFICATE HOLDER</b> City of Belle Isle 1600 Nela Ave. Belle Isle, FL 32809	<b>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</b>  AUTHORIZED REPRESENTATIVE  <AMI>
---	--

ACORD 25 (2010/05)      The ACORD name and logo are registered marks of ACORD      © 1988-2010 ACORD CORPORATION. All rights reserved.

**Scott Randolph, Tax Collector      Local Business Tax Receipt      Orange County, Florida**

This local business tax receipt is in addition to and not in lieu of any other tax required by law or municipal ordinance. Businesses are subject to regulation of zoning, health and other lawful authorities. This receipt is valid from October 1 through September 30 of receipt year. Delinquent penalty is added October 1.

\*\*\*ORIGINAL\*\*\*      2013      EXPIRES 9/30/2014      1802-0866079  
 1802 REG ELECTRICAL CONTRA \$30.00 1      EMPLOYEE 5000 BUSINESS OFFICE      \$30.00 4      EMPLOYEE ;



TOTAL TAX \$60.00  
 PREVIOUSLY PAID \$60.00  
 TOTAL DUE \$0.00

BOWMAN JON H

5802 MAKOMA DR #2  
 U - ORLANDO, 32839

J & K INVESTMENT COMPANY OF .  
 ORLANDO INC  
 2722 10TH ST  
 ORLANDO FL 32820

PAID: \$60.00 099-00595546 8/18/2013

This receipt is official when validated by the Tax Collector.

THIS DOCUMENT HAS A COLORED BACKGROUND • MICROPRINTING • LINEMARK™ PATENTED PAPER

AC# 6149734

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
 ELECTRICAL CONTRACTORS LICENSING BOARD

SEQ# L12060101816

DATE	BATCH NUMBER	LICENSE NBR
06/01/2012	118196304	EC13002060

The ELECTRICAL CONTRACTOR  
 Named below IS CERTIFIED  
 Under the provisions of Chapter 489 FS.  
 Expiration date: AUG 31, 2014

BOWMAN, JON H  
 J & K INVESTMENT COMPANY OF ORLANDO INC  
 2722 10 TH STREET  
 ORLANDO FL 32820

RICK SCOTT  
 GOVERNOR

KEN LAWSON  
 SECRETARY

DISPLAY AS REQUIRED BY LAW