

P19000086765

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

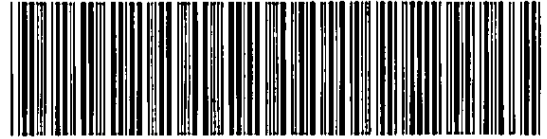
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11/04/19--01013--016 **87.50

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19 NOV -4 PM 1:44
SECRETARY OF STATE
ATLANTA, GEORGIA

COVER LETTER

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

SUBJECT: JAS GROUP INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: M.MARTINEZ TAX AND ACGT SERVICE

Name (Printed or typed)

7910 HARBOR ISLAND DR B1011

Address

NORTH BAY VILLAGE FL 33141

City, State & Zip

786-897-1055

Daytime Telephone number

MARTINEZ.MARGARET82@GMAIL.COM

E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

JAS GROUP INC1051

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1051 E

23RD ST

HIALEAH FL 33013

ARTICLE III PURPOSE

TO PROVIDE REAL ESTATE SERVICES

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

10000

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOYCE A SIERRA

Name and Title:

Address: 13000

Address:

KEYSTONE TERR

MIAMI FL 33181

Name and Title: PRESIDENT

Name and Title:

Address: 13000

Address:

KEYSTONE TERR

MIAMI FL 33181

Name and Title:

Name and Title:

Address:

Address:

FILED
19 NOV -4 PM 1:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: JOYCE A SIERRA
 Address: 13000 KEYSTONE TERR
MIAMI FL 33181

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: M MARTINEZ TAX & ACTG SERVICE
 Address: 7910 HARBOR ISLAND DR B 1011
NORTH BAY VILLAGE FL 33141 01-01-20

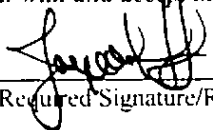
ARTICLE VIII EFFECTIVE DATE: 01/01/2020

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

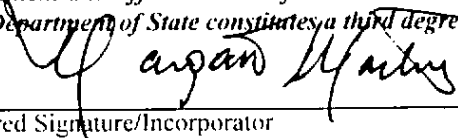


 Required Signature/Registered Agent

10-30-2019

 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

10-30-2019

 Date

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: JAS GROUP INC1051

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1051 E. _____

25RD ST _____

HALEAH FL 33013 _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO PROVIDE REAL ESTATE SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 10000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOYCE A SIERRA _____

Name and Title: _____

Address: 13000 _____

Address: _____

KEYSTONE TERR _____

MIAMI FL 33181 _____

Name and Title: PRESIDENT _____

Name and Title: _____

Address: 13000 _____

Address: _____

KEYSTONE TERR _____

MIAMI FL 33181 _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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: JOYCE A SIERRA
 Address: 12000 KEYSTONE TERR
MIAMI FL 33181

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: M MARTINEZ TAX & ACTG SERVICE
 Address: 7910 HARBOR ISLAND DR B 1011
NORTH BAY VILLAGE FL 33141 01-01-20

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01-01-2020 (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

 Date: 10-30-2019

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

 Date: 10-30-2019