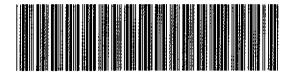
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(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
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(Document Number)				
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COVER LETTER

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

SUBJECT: JAK IMAGING CORPO	ORATION	
	ATE NAME – <u>MUST INC</u> I	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the art	icles of incorporation an	d a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL C	OPY REQUIRED
		·
FROM: JOE ATICK	e (Printed or typed)	
2275 N.W. 84TH AVEN		·····
	Address	
DORAL, FLORIDA 3312	22-1519 , State & Zip	
City	, State & Zip	
(305) 406-2700 Daytime 1	Telephone number	······································
joeatick@jaacx.com E-mail address: (to be use	ed for future annual renort	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)

	NAME JAK IMAGING CORI	PORATION	
The name of the corp	poration shall be:		
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing a	Idress, if different is:
22	275 N.W. 84TH AVENUE		
	ORAL, FL 33122-1519		
ARTICLE III P	PURPOSE		
The purpose for wh	ich the corporation is organized is:		
WHOLESALE	, EXPORT AND GENERAL COM	MERCIAL OPERATION	IS
		,	
ARTICLE IV	SHARES		
	es of stock is ONE HUNDRED (100) C	COMMON SHARES, \$1	PAR VALUE EACH.
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	TORS	
Name and Tit	le:JOE ATICK, P/S/D	Name and Title:	
Address:	2275 N.W. 84TH AVENUE	Address:	
	DORAL, FL 33122-1519		
Nome and Titl	io.	Name and Title:	
Address:	le:	Address:	
Addiess.			
,			
Name and Tid			
Address:	le:	Address	
			1.2 to 1.
	REGISTERED AGENT	1	ρφ : 2% - 1 - 1
The <u>name and Flor</u> Name:	ida street address (P.O. Box NOT acceptable JOE ATICK	le) of the registered agent is:	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Address:	2275 N.W. 84TH AVENUE		7 =
Addiess.	DORAL FL 33122-1519		3
	-12017AL-,-1- H-WW1222=13U-3	·	စဉ
	INCORPORATOR		. 114
The <u>name and addr</u>	ress of the Incorporator is:		O 💃
Name:	JOE ATICK	 	
Address:	2275 N.W. 84TH AVENUE DORAL, FL 33122-1519		•
Uavina been name	d as registered agent to accept service of pr	pages for the phone stated com-	notion at the place declared t
	t as registered agent to accept service of pr familiar with and accept the appointment a		
,,			
\ \ /			AUGUST 20,2012
	Required Signature/Registered Agent		Date
l submit this docum	nent and affirm that the facts stated herein	are true. I am aware that the	false information submitted in
	partment of State-constitutes a third degree f		
. /			
X	/11/11/11/		AUGUST 20,2012
	Required Signature/Incorporator		Date