90004/// Department of State

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

SUBJECT:	JAM <u>ENVITON</u> (Proposed corpo	mental Include sufference of the sufference of t	<i>C.</i> 00003216 -04/20/000 *****78.75	- 5552 11060006 *****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	
FROM: Brigs S. McGally Name (Printed or typed)				
232 Arcadia Dr. Address				
	welling for P	1. 33 464 tate & Zip	SECRI TALLA	· · · · · · · · · · · · · · · · · · ·

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

561 793 3213

Daytime Telephone number

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:

JAM ENVISON MENTED, FNC

ARTICLE II PRINCIPAL OFFICE

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

PO BOX 210421 West Palm Beach, Fl. 33421-0421

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Brian 5. McCully 232 Araphia Sruy 1 Wellingho Fl 33414 ARTICLE V INCORPORATOR

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

Brian S. Mchully 232 Arcades Ar Wellingford F1 33414

Signature/Incorporator

4/17/00 Date

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(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

Date