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To:
Division of Corporations
Fax Number : (850)205-0381

From:
Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

JAKAL CLAIMS SOLUTIONS, INC.

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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B. McKeigh OCT - 3 2001

ARTICLES OF INCORPORATION
OF
Jakal Claims Solutions, Inc. »

The undersigned incorporators, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be: Jakal Claims Solutions, Inc.

The principal place of business of this corporation shall be:

3235 Glenridge Drive
Palm Harbor, FL 34685

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 1,000 having a par value of \$1.00.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name and street address of the initial officers and directors, if any, who shall hold office the first year of the corporation's existence or until his successor is elected, are:

Joseph E. Hepp, III, 3235 Glenridge Drive, Palm Harbor, FL 34685

Prepared by: KJC & Associates, Inc.
11125 Park Blvd., #104-342
Seminole, FL 33772-4700
(727) 515-0804

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ARTICLE VI INCORPORATOR

The name and street address of the incorporator to this articles of incorporation is:

Name:

Office:

Address:

Joseph E. Hepp, III

President,
Secretary

3235 Glenridge Drive
Palm Harbor, FL 34685

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 13th day of September, 2001.

Signature of Incorporator

Joseph E. Hepp, III ✓

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation: Jakal Claims Solutions, Inc.
2. The name and address of the registered agent and office is:

Joseph E. Hepp, III
3235 Glenridge Drive
Palm Harbor, FL 34685

SIGNATURE: Joseph E Hepp III ✓

TITLE: President

DATE: September 13, 2001

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE: Joseph E Hepp III ✓

DATE: September 13, 2001

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