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(Requestor's Name)	
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PICK-UP WAIT M	AIL
(Business Entity Name)	
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(Document Number)	
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Certified Copies Certificates of Status _	
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SECRETARY OF STAIL

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TRANSMITTAL LETTER

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

SUBJECT:	JAX Star (PROPOSED CORPORA)	R TO CHE NAME - MUST INCLU	DE SUFFIX)		
			EF.	FECTIVE BATE	
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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	£	
FROM: Inda ONOSA Name (Printed or typed)					
11215-4 St. Johns Industrial Address PKWY.					
	JKO. FI	. 3 224 Le State & Zip	5		
	904 - 99 Daytime Te	7 1001		4	

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

nos-31129;



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

December 10, 2002

LINDA CONOVER 11215-4 ST. JOHNS INDUSTRIAL PKWY. JACKSONVILLE, FL 32246

SUBJECT: JAX STAR INC. Ref. Number: W02000034569

We have received your document for JAX STAR INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6878.

Letter Number: 102A00065265

Alan Crum Document Specialist New Filing Section

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: JAKStan of Jacksonville, Inc. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: JACKSONUIlle, Fl. 32246 The purpose for which the corporation is organized is: ARTICLE IV The number of shares of stock is: ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): luorgeo i REGISTERED AGENT The name and Florida street address of the registered agent is: The name and address of the Incorporator is: 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

Signature/Registered Agent

Signature/Incorporator

P9

Article IIX Date to be Effective

1-1-2003