

Florida Department of State Division of Corporations

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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.

J.A.P. SERVICES GROUP CORPORATION.

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ARTICLES OF INCORPORATION

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J.A.P. SERVICES GROUP CORPORATION.

THE UNDERSIGNED ACTING AS SUBSCRIBER OF A CORPORATION UNDER THE FLORIDA CORPORATION LAW, ADOPT THE FOLLOWING ARTICLES OF INCORPORATION FOR SUCH CORPORATION.

ARTICLE_I

THE NAME OF THE CORPORATION IS, J.A.P. SERVICES GROUP CORPORATION.

ARTICLE II

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED TO ENGAGE IN ANY ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAW OF THE UNITED STATES AND THE STATE OF FLORIDA.

ARTICLE III

THE MAXIMUM OF SHARES WHICH THE CORPORATION IS AUTHORIZED TO HAVE ISSUED AND HAVE OUTSTANDING AT ANY ONE TIME IS 50 SHARES OF COMMON STOCK, AS WHICH COMMON SHALL BE OF NO PAR VALUE. ALL STOCK IS TO BE ISSUED AS FULLY PAID AND EXEMPT FROM ASSESSMENT.

ARTICLE IV

THE CAPITAL WITH WHICH THE CORPORATION SHALL BEGIN BUSINESS IS NOT LESS THAN FIVE HUNDRED DOLLARS.

. ARTICLE V

THE EXISTENCE OF THE CORPORATION IS PERPETUAL.

ARTICLE VI

THE INITIAL POST OFFICE ADDRESS AND PRINCIPAL OFFICES OF THE CORPORATION IN THE STATE OF FLORIDA SHALL BE AT 7655 SHALLMAR STREET, MIRAMAR, FLORIDA 33023.

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ARTICLE VII

THE BOARD OF DIRECTORS MAY FROM TIME TO TIME MOVE THE PRINCIPAL OFFICES TO AND OTHER ADDRESS WITHIN THE STATE OF FLORIDA.

ARTICLE VIII

THE NUMBER OF DIRECTORS CONSTITUTING THE INITIAL BOARD OF DIRECTORS CONSISTING OF NOT LESS THAN (1) NOR MORE THAN (5).

ARTICLE IX

THE NAME AND POST OFFICE ADDRESSES OF THE MEMBERS OF THE FIRST BOARD OF DIRECTORS AND SLATE OF CORPORATE OFFICERS ARE, JOSE ANTONIO PONS, PRESIDENT, SECRETARY & TREASURY, 7655 SHALIMAR STREET, MIRAMAR, FLORIDA 33023

ARTICLE X

NO STOCKHOLDERS OF THE CORPORATION SHALL BE PERMITTED TO SELL OR OFFER FOR SALE HIS SHARES OF THE STOCK IN THE CORPORATION WITHOUT FIRST OFFEREING SAID SHARE FOR SALE TO ALL OTHER STOCKHOLDERS OF THE CORPORATION, AT THEIR BOOK VALUE. THE REMAINING STOCKHOLDERS MAY PURCHASE ALL OR ANY PART OF THE SHARES OF STOCK OFFERED FOR SALE BY THE OTHER STOCKHOLDERS.

ARTICLE XII

THE STOCK OF THE CORPORATION MAY BE ISSUED PURSUANT TO THE PROVISIONS UNDER 1244 OF INTERNAL REVENUE CODE, IN ORDER FOR THE STOCKHOLDERS OF THE CORPORATION MAY RECEIVED THE BENEFITS THERE UNDER.

ARTICLE XII

THE NAME AND POST OFFICE ADDRESS OF THE PERSON SUBSCRIBED THIS

ARTICLES OF INCORPORATION IS, JOSE ANTONIO PONS, 7655 SHALIMAR ST, MIRAMAR,

FL, 33023. - 2 -

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ARTICLE XIII

militate Militate	•
IN WITNESS WHEREOF, WE HAVE HEREUNTO SE	ET OUR HANDS AND SEALS
THIS 25 DAY OF MARCH	2004
	· ·
	QUAT (SEAL (
SUBSCRIENT	(GEAL)
REGISTERED	(SEAL (
red islered	(SEAL'
	(SEAL (
STATE OF FLORIDA)	
COUNTY OF DADE)	
I HEREBY CURTIFY THAT ON THIS DAY PERSO	ONALLY APPEARD BEFORE ME,
AND OFFICER DULY AUTHORIZED TO TAKE ACH	KNOWLEDGMENTS AND ADMINISTAR
OATHS IN THE STATE OF FLORIDA.	
TO ME WELL KNOWN TO BE THE PERSONS DESC	CRIBED IN AND WHO EXECUTED
THE FOREGOING ARTICLES OF INCORPORATION	N, AND WHO ACKNOWLEDGED
BEFORE ME THAT THEY EXECUTED THE SAME F	FREELY AND VOLUNTARILLY FOR
THE PURPOSE THEREIN EXPRESSED.	
WITNESS, MY HAND AND OFFICAL SEAL THIS	25 DAY OF MARCH
2804 , AT MIAMI COUNTY OF	DADESTATE OF FLORIDA.
	•
¥	
NOTARY PUBLIC	C, STATE OF FLORIDA AT LARGE.
MY COMMIS	SSION EXPIRES.

-- H ---

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E ... THERMS D. .

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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 CORPORA	TION IS, J.	A. P. SERVICES G	ROUP CORPORATION.
2. THE NAME AND ADDRESS OF JOSE ANTONIO PONS, 7655 SHA		•	•
. :			TALL SEC
	SIGNATURE TITLE DATE	PRESPENT. 3/23/2004.	ARC 26 AM
HAVING BEEN NAMED AS REGIS PROCESS FOR THE ABOVE STAT	STERED AGENT	AND TO ACCEP	T SERVICE OF
THIS CERTIFICATE. I HEREE AGENT AND AGREE TO ACT IN WITH THE PROVISIONS OF ALL COMPLETE PERFORMANCE OF MY ACCEPT THE OBLIGATION OF M	BY ACCEPT THE THIS CAPACI THIS CAPACI STATUTES FOR DUTIES, AN	HE APPOINTMENT ITY. I FURTHER RELATING TO TH NO A AM FAMILI	AS REGISTERED AGREED TO COMPLY E PROPER AND AR WITH AND
v	SIGNATURE_	3/25/2004.	