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C.S. 514

TRANSMITTAL LETTER

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

SUBJECT:	DJASBON CORP. (PROPOSED CORPORA	THE NAME OF THE OWNER.	III NOTA HA NA		
	(FROFOSED CORFORA	TE NAME - MOST INCL	ODE SOFFIA)		
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	la check for:	3	
\$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 PPY REQUIRED		
FROM: OJ	ASBON CORP.				
	Name	(Printed or typed)		•	
	5413 WELLCRAFT DRIVE	Address		17 W	-
:	GREENACRES, FL 33463 City.	State & Zip		-	j mojapove ene e e e e
	(969-7362	elephone number	÷		— —

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)

ARTICLE I NAME

The name of the corporation shall be:

OJASBON CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 5413 WELLCRAFT DRIVE GREENACRES, FL 33463

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SECRETARY OF STATE
SECRETARY OF STATE

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ENGAGE AND TRANSACT IN ANY AND ALL LAWFUL ACTIVITIES OR BUSINESS PERMITED UNDER THE LAW OF THE UNITED STATES OF AMERICA, THE STATE OF FLORIDA, OR ANY OTHER STATE, COUNTRY, TERRITORY OR NATION.

ARTICLE IV SHARES

The number of shares of stock is:

THE MAXIMUM OF SHARES OF STOCK THAT THIS CORPORATION HAS AUTHORITY TO HAVE OUTSTANDING AT ANY TIME IS 100 SHARES OF COMMON STOCKS. HAVING \$1.00 PER VALUE PER SHARE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

OSCAR A. JASBON 5413 WELLCRAFT DRIVE GREENACRES, FL 33463. PRESIDENT

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

DANIELA B. SAR PEREZ 3150 S CONGRESS AVENUE PALM SPRINGS, FL 33461

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

OSCAR A. JASBON 5413 WELLCRAFT DRIVE GREENACRES, FL 33463

GREENACRES, FL 33463	
**************************************	***********
Having been named as registered agent to accept service of process for the certificate, I am familiar with and accept the appointment as registered agent	
Signature/Registered Agent)	Date
SENSISTON	5/10/05
Signature/Incorporator	Date