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

From:  
Account Name : XIOMARA LEE, P.A.  
Account Number : I20040000008  
Phone : (305)262-2323  
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**FLORIDA PROFIT/NON PROFIT CORPORATION**

**JARAP CORP.**

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$87.50

Electronic Filing Menu

Corporate Filing Menu

Help

MRS 2/15

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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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**ARTICLE I NAME**

The name of the corporation shall be:

JARAP CORP.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

2501 SW 127 CT  
MIAMI, FL 33175

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

JANET RAMIREZ (PRESIDENT/DIRECTOR)  
2501 SW 127 CT  
MIAMI, FL 33175

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

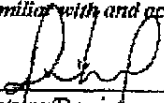
JANET RAMIREZ  
2501 SW 127 CT  
MIAMI, FL 33175

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JANET RAMIREZ  
2501 SW 127 CT  
MIAMI, FL 33175

\*\*\*\*\*  
*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*

x   
\_\_\_\_\_  
Signature/Registered Agent

02/14/2006

\_\_\_\_\_  
Date

x   
\_\_\_\_\_  
Signature/Incorporator

02/14/2006

\_\_\_\_\_  
Date

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