80000 8925 Bage Jof 1 E Seller Florida Department of State (F) Division of Corporations Public Access System  $\frac{\omega}{0}$ **Electronic Filing Cover Sheet**  ${\mathbb P}$ õ Note: Please print this page and use it as a cover sheet. Type the fax audit 22 number (shown below) on the top and bottom of all pages of the document (((H08000224045 3))) H080002240453ABC7 Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. Please file A.S.A.P. To: Division of Corporations Fax Number : (850)617-6381 From: Thank You Account Name : FASTKIT CORPORATE OUTFITS Account Number : 071001002335 Phone : (305) 599-0839

# FLORIDA PROFIT/NON PROFIT CORPORATION TREPHE BRANCH

Fax Number : (305)716-0346

# JLF MANAGEMENT CORP

Certificate of Status	0
Certified Copy	1
Page Count	01
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Corporate Filing Menu

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September 30, 2008

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FLORIDA DEPARTMENT OF STATE Division of Corporations

SUBJECT: JLF MANAGEMENT CORP

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P.O BOX 6327 - Tallahassee, Florida 32314

# **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:

## JLF MANAGEMENT CORP

## ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 1100 SW 57 Ave West Miami, FL 33144

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Management

## ARTICLE IV SHARES

The number of shares of stock is: 50 Shares no par value

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

List name(s), address(es) and specific title(s): Yasniela Flores-1100 SW 57 Ave West Miami, FI 33144-•President, Treasurer and Secretary

#### ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: Yasniela Flores-1100 SW 57 Ave West Miami. Fl 33144

## ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Yasniela Flores-1100 SW 57 Ave West Miami, FI 33144

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, i any familian with and accept the appointment as registered agent and agree to act in this capacity

100 Signature(Registered Agent

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Signature/Incorporator

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SECRETARY OF STATE TALLAHASSEE, FLORIDA