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SEGRETARY OF STATE
ALLAHASSEF, FIRE

COVER LETTER

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

SUBJECT:		JAN CORP.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	<u>ude suffix</u>)	
Enclosed are an orig	inal and one (1) copy of the arti	cles 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	& Certificate of Status	
FROM:	Roberto			
	5470 W 23	rudicss		
		12 3 301C State & Zip		
		- 423 - 86' clephone number a hotuail. Ca		
E-mail address: (to be used for future annual report notification)				

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME The name of the corporation shall be:	
Mi Talisman Corp	
ARTICLE II PRINCIPAL OFFICE	
The principal street address and mailing address, if different is:	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: PROJESSIONAL CORP	TILED 1009 MAY 11 P 5: 02 SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE IV SHARES The number of shares of stock is:	5: 02 STATE LORIDA
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Roberto Sana bria, President 6470 w 22 Lane # 106, Hialegh, F	T 33016
ARTICLE VI REGISTERED AGENT	1, 500,0
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agei	nt is:
Roberto Sanabnia Presidente #106, H. Aleah, ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Roberto Sanabnia Presidente 5470 W 22 Jane #100 Lial Lah 21 33010 *********************************	ent Fl. 33016
**************************************	******
place designated in this certificate, I am familiar with and accept the appointment a	ated corporation at the is registered agent and
Signature/Registered-Agent	16/09 Date 16/05
	*
Signature/Incorporator	Date

ARTICLES OF INCORPORATION