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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : FASTKIT CORP
Account Number : I20100000009
Phone : (305) 599-0839
Fax Number : (305) 592-9591

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
JAM MANAGEMENT INC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

Handwritten signature and date: 08/24/11

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Corporate Filing Menu

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME JAM MANAGEMENT INC
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address:
407 Lincoln Rd Ste 9A
Miami Beach, FL 33139

Mailing address, if different is:
P.O. Box 191076
Miami Beach, FL 33119-1076

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Construction Management & Consulting

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ana Maria Corpora
Address: 407 Lincoln Rd Ste 9A
Miami Beach, FL 33139

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Ana Maria Corpora
Address: 407 Lincoln Rd Ste 9A
Miami Beach, FL 33139

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Ana Maria Corpora
Address: 407 Lincoln Rd Ste 9A
Miami Beach, FL 33139

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

Ana Maria Corpora
Required Signature/Registered Agent

08/18/2011
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.

Ana Maria Corpora
Required Signature/Incorporator

08/18/2011
Date

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