## PHUW 2695

(Re	equestor's Name)	
. (Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SAMESION OF EAST PAIRS



March 17, 2014

Department of State New Filing Section Division of Corporation PO Box 6327 Tallahassee, FL 32314

SUBJECT: JEDS TV, Inc.

Enclosed are an original and one (1) copy of the articles of incorporation and a check for \$78.75 (Filing Fee and Certification of Status.

FROM:

Tammy J Green

555 NE 34th Street #1911

Miami, FL 33137 305-281-8550

tammyjgreen@aol.com

Sincerely;

Tammy J Green

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

ARTICLE I NA. The name of the corpora	ME Ation shall be: \( \sum \) \(	V \~	STISTON CHAY OF
ARTICLE II PR	INCIPAL OFFICE	,	4 MAR 2
	Principal street address	]	Mailing address, in different is:
565 NE	34m St. #1911		
Miami	FL. 33137		
	the corporation is organized is:	es of	pronicement
materi	<u>al.</u>		
		<del></del>	
		·	
	1844 - 1846 - 18		
ARTICLE IV SH. The number of shares of			
The number of shares of	1 Stock 15.		
ARTICLE V INI	TIAL OFFICERS AND/OR DIRECTOR	<u>s</u>	
Name and Titl	e: Tammy J. Green, Pres	, Name and Title	Lauren Green Martincak
Address	665 NE 34 ST. #1911	Address:	V.P. / Sec.
	Miami, FL.		555 NE 34 - St. #1911
	•		Miam: FL. 33137
			Viliam., FL. 33131
Name and Title	2:	Name and Title	•
Address		Address:	
V - <b>3 3 - 5 5 5</b>		•	
	* * * * * * * * * * * * * * * * * * *	•	
		•	
Name and Title	9;	Name and Title	
Address		_ Address:	
		-	

Name :	nd Title: Name and Title:	
Addre	Address:	
	REGISTERED AGENT Sorida attrect address (P.O. Box NOT acceptable) of the registered agent is:	
Name:	Albert Colon Wald & Cohon PA	
Address:	11420 N. Kendall D-	
	Miami FL. 33176	
ARTICLE VII	INCORPORATOR	
The name and	address of the Incorporator is:	
Name:	Trany Coreco	
Address:	555 NE 347 St. \$1911	
	M. ami EL. 33137	
Having been na this certificate, i	med as registered agent to accept service of process for the above stated of am familiar with and accept the appointment as registered agent and agre	orporation at the place designated in e to act in this capacity
	ant R. Cole CPA	3117114
	Required Signature/Registered Agent	Date
I submit this do	cument and affirm that the facts stated herein are true. I am aware that Department of Slate constitutes a third degree felony as provided for in 28	the false information submitted in a 317.155, F.S.
		3/17/14
	Required Signature/Incorporator	Days 7

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