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(Requestor's Name)

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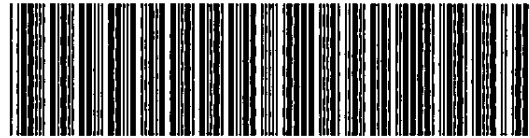
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TREASURY OF STATE
TALLAHASSEE, FLORIDA

OCT 21 2014

S. GILBERT

COVER LETTER

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

SUBJECT: JK Payroll Holding Company, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Gary A. Zwick, Esq. - WALTER|HAVERFIELD LLP

Name (Printed or typed)

1301 E. 9th Street, Suite #3500

Address

Cleveland, Ohio 44114

City, State & Zip

(216) 928-2902

Daytime Telephone number

kohnjacob@gmail.com

E-mail address: (to be used for future annual report notification)

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

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: JK Payroll Holding Company, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

768 Bedford Avenue

Brooklyn, NY 11205

Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in any lawful act or activity for which
corporations may be formed in the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Abraham Kohn, Director

Address: 768 Bedford Avenue
Brooklyn, NY 11205

Name and Title: Jacob Kohn, Director

Address: 768 Bedford Avenue
Brooklyn, NY 11205

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

(cont.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Corporation Service Company
Address: 1201 Hays Street
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Gary A. Zwick, Esq. - WALTER|HAVERFIELD LLP
Address: 1301 E. 9th Street, Suite #3500
Cleveland, Ohio 44114

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

Corporation Service Company
Required Signature/Registered Agent

10-15-14
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.

Gary A. Zwick
Required Signature/Incorporator

10/15/14
Date