

SEP/17/2015 THU 02:50 PM

FAX No.

P. 001

P/SU0076724

Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
JEFF WHOLESALE GOLD INC**

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FAX No.

P. 002

FILED

ARTICLES OF INCORPORATION 5 SEP 17 PM 7:32
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME
The name of the corporation shall be: JEFF WHOLESALE GOLD INC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address

1516 NW 119 STREET

APT 107

MIAMI, FL 33167

Mailing address, if different is:

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

SHARES: 100
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JEFF FREDERIC (P/S/D)

Address: 1516 NW 119 STREET

APT: 107

MIAMI, FL 33167

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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: JEFF FREDERICAddress: 1516 NW 119 STREET APT 107MIAMI, FL 33167ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JEFF FREDERICAddress: 1516 NW 119 STREET APT 107MIAMI, FL 33167ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.*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*Jeff Frederic
Required Signature/Registered Agent09/15/15
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.817.133, F.S.*Jeff Frederic
Required Signature/Incorporator09/15/15
Date