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COVER LETTER

Department of S New Filing Sect Division of Corp P. O. Box 6327 Tallahassee, FL	tion porations	Note: W150 Form, c as and stynate	this OOO ntod li NE ha icaten unos a	15 the re-file 62808 wh Acked Stynature of mistakeny control PDF temple populied. Tha	CM YOUR es en the USED Elec Olale, OMSIN	COM COM Thomas Led by 15e 52	iect c 5 i justo c hard c 5 the lust
SUBJECT: JAC	GAR ENTERP	RISES, INC		1/	- tors	i znati	PREMATOR
	(1	PROPOSED C	ORPORAT	E NAME – <u>MUSTAINCL</u>	UDE SUFFIX)		-
Enclosed are an	original and	one (1) copy	of the artic	eles of incorporation and	d a check for:	-	
\$70.0	00 🖼 \$7	R 75	1	4 \$78.75	\$87.50		
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FROM:	YVONNE W	. BLOM				_	
			Name	(Printed or typed)		-	
	1415 SE PRO	CTOR LANE				_	
			A	ddress			
	PORT ST LU	CIE, FL 34983			31) 1	55	
			City, S	state & Zip	15_	T TH	
	305-793-1780				(11) (11)	25 27 (LUI LUI

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

Daytime Telephone number

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

yvonnel112@aol.com



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 22, 2015

YVONNE W. BLOM 1415 SE PROCTOR LANE PORT ST LUCIE, FL 34983

SUBJECT: JAGAR ENTERPRISES, INC

Ref. Number: W15000062808

We have received your document for JAGAR ENTERPRISES, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 015A00019948

15 SEP 25 MH: 26

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

of the corpo	JAGAR ENTERPRISES, INC		15 SEP 25
E II PRI	NCIPAL OFFICE Principal <u>street</u> address	:	Mailing address, if different is TARY Charles and the second seco
PROCTOR	LANE		
T LUCIE, F	L 34983		
LE III PUR Dose for which	POSE the the corporation is organized is:	nport and export b	ouying and selling activities, & general
ş services on	matters of international trade.		
E IV SHA ber of shares E V INFI Name and T Address	of stock is: TIAL OFFICERS AND/OR DIRECTORS YVONNE W. BLOM, Pres & Vice Pres	Name and Title Address:	RICHARD A. BLOM sec & treasuer 1415 SE PROCTOR LANE PORT ST LUCIE, FL 34983
ber of shares E V INF Name and T Address	of stock is: FIAL OFFICERS AND/OR DIRECTORS YVONNE W. BLOM Pres & Vice Pres 1415 SE PROCTOR LANE	_ Address:	1415 SE PROCTOR LANE PORT ST LUCIE, FL 34983
ber of shares E V INF Name and T Address	of stock is: FIAL OFFICERS AND/OR DIRECTORS YVONNE W. BLOM Pres & Vice Pres 1415 SE PROCTOR LANE PORT ST LUCIE, FL 34983	_ Address: Name and Title	1415 SE PROCTOR LANE PORT ST LUCIE, FL 34983
ber of shares E V INT Name and T Address Name and Tir Address	of stock is: FIAL OFFICERS AND/OR DIRECTORS YVONNE W. BLOM Pres & Vice Pres 1415 SE PROCTOR LANE PORT ST LUCIE, FL 34983	_ Address: _ Name and Title _ Address: _ Name and Title	1415 SE PROCTOR LANE PORT ST LUCIE, FL 34983

Name a	nd Title:	Name and Title:
Addres	is	Address:
	REGISTERED AGENT	
The <u>name and I</u>	Florida street address (P.O. Box NOT accept	able) of the registered agent is:
Name:	RICHARD A. BLOM	
Address:	1415 SE PROCTOR LANE	
	PORT ST LUCIE, FL 34983	
ARTICLE VII	<u>INCORPORATOR</u>	7. MILED
The name and a	ddress of the Incorporator is:	
Name:	YVONNE W. BLOM	26 26 · · ·
Address:	1415 SE PROCTOR LANE	
	PORT ST LUCIE, FL 34983	
Effective date, if (If an effective days after the f	iling.)	cannot be more than five business days prior or 90 business licable statutory filing requirements, this date will not be listed as
Having been na	med as registered agent to accept service of	process for the above stated corporation at the place designated in t as registered agent and agree to act in this capacity
	RICHARD A BLOM [9/9/2015
	Required Signature/Registered Age	ent Date
	cument and affirm that the facts stated here Department of State constitutes a third degre	in are true. I am aware that the false information submitted in a see felony as provided for in s.817.155, F.S.
	WONNEW BLOM	9/9/2015
Requ	nired Signature/Incorporator	Date