

NOV/12/2015/THU 11:55 AM

11/12/2015

DIVISION OF CORPORATIONS

P. 001/003

PI5000270349

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000270349 3)))



H150002703493ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : I20000000146
Phone : (305)444-4994
Fax Number : (305)444-4977

****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
JERRY MANAGEMENT CORP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

15 NOV 12 PM 2:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

ARTICLE I NAME JERRY MANAGEMENT CORP
The name of the corporation shall be: _____

<u>ARTICLE II PRINCIPAL OFFICE</u>	Principal <u>street</u> address	Mailing address, if different is:
1930 SW 21ST STREET		PO BOX 450980
MIAMI, FL 33145		MIAMI, FL 33245

ARTICLE III PURPOSE ANY AND ALL LAWFULL BUSINESS
The purpose for which the corporation is organized is: _____

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	BENJAMIN MATOS (P)	Name and Title:	
Address	1930 SW 21ST STREET	Address:	
	MIAMI, FL 33145		
Name and Title:	ELVIRA MATOS (V/P)	Name and Title:	
Address	1930 SW 21ST STREET	Address:	
	MIAMI, FL 33145		
Name and Title:		Name and Title:	
Address		Address:	

FILED
15 NOV 12 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FL 32399-0001

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: BENJAMIN MATOS
Address: 1930 SW 21ST STREET
MIAMI, FL 33145

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: BENJAMIN MATOS
Address: 1930 SW 21ST STREET
MIAMI, FL 33145

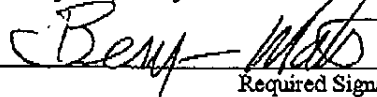
ARTICLE VIII EFFECTIVE DATE:

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

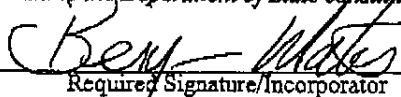


Required Signature/Registered Agent

11/11/2015

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.



Required Signature/Incorporator

11/11/2015

Date