

**PI5000092309**

**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.**

**(((H15000270746 3)))**



H150002707463ABC%

**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 : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

**\*\*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  
JACKCARP.USA, INC**

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

FILED  
15 NOV 12 PM 2:58  
SECRET  
TALLAHASSEE FL 32301

**ARTICLES OF INCORPORATION** H15000270746  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I. NAME: The name of the corporation is:

JACKCARPUSA, INC

ARTICLE II. PRINCIPAL OFFICE:

The principal street address and mailing address is:

13440 SW 271 LN Homestead FL 33032

ARTICLE III. SHARES: The number of shares of stock is: 100

ARTICLE IV. INITIAL DIRECTORS AND/OR OFFICERS:

JACK MARTIN DIAZ (P)

ARTICLE V. INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

JACK MARTIN DIAZ  
13440 SW 271 LN Homestead FL  
33032

ARTICLE VI. INCORPORATOR: The name and address of the Incorporator is:

JACK MARTIN DIAZ  
13440 LN 271 NW  
Homestead FL 33032

H15000270746


SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 NOV 12 PM 2:58

FILED

H15000270746

Required Signatures:

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

 \_\_\_\_\_ 11-12-15  
Registered Agent 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.

 \_\_\_\_\_ 11-12-15  
Incorporator Date

H15000270746