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| PICK-UP | WAIT | MAIL | | |
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| Certified Copies | _ Certificates | of Status | | |
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| Chanial Instructions to 1 | Filing Officer | | | |
| Special Instructions to I | Filing Officer: | | | |
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COVER LETTER

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

| SUBJECT: | JDS Hospitality, Inc. | | |
|-------------------------|---|---------------------------------------|-------------------------|
| Sebuler | (PROPOSED CORPORA | TE NAME - MUST INCL | UDE SUFFIX) |
| Enclosed are an o | original and one (1) copy of the art | icles of incorporation and | d a check for: |
| ☐ \$70.00 Filing Fee | | □ \$78.75 Filing Fee & Certified Copy | & Certificate of Status |
| | | ADDITIONAL CO | OPY REQUIRED |
| FROM: | John E. Duncan Name 300 Golf Brook Circle # 200 | e (Printed or typed) | |
| - | | Address | |
| 1 | Longwood Florida 32779 | | |
| _ | City, | State & Zip | |
| : | 305-522-5233 | | |
| - | Daytime T | elephone number | |
| į | dfmy51@gmail.com | | |
| _ | E-mail address: (to be use | d 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 II PRINC | TIPAL OFFICE Principal street address | 1 | Mailing address, if different is: |
|--|---|--------------------------|---------------------------------------|
| 300 Golf Brook Circle | #200 | | |
| Longwood, FL 32779 | | | |
| ARTICLE III PURPO The purpose for which t Any Lawful Purpose | OSE he corporation is organized is: | | 25° CO 17 |
| | | | · · · · · · · · · · · · · · · · · · · |
| | | | |
| | Stock is: Stock | <u>s</u> | Susan O. Duncan Vice President |
| Name and Title | 300 Golf Brook Circle #200 | Name and Title: Address: | 300 Golf Brook Circle #200 |
| Address | Longwood, FL 32779 | Address. | Longwood, FL 32779 |
| Name and Title Address | : | Address: | |
| Name and Title | | · ··· | |
| Address | | Address: | |
| | | | |

| Name a | nd Title: | Name and Title: | |
|---|---|---|---|
| Addres | | Address: | |
| | | | |
| | | | |
| | REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) | of the registered agent is: | -1 |
| Name: | John E. Duncan | | 266 8 |
| Address: | 300 Golf Brook Circle #200 | _ | |
| | Longwood, FL 32779 | - | FILED 16 MAR -B PH |
| <u>ARTICLE VII</u> | <u>INCORPORATOR</u> | | 2: 10 |
| The name and a | address of the Incorporator is: | | ₹• |
| Name: | John E. Duncan | | |
| Address: | 300 Golf Brook Circle #200 | | |
| | Longwood, FL 32779 | _ | |
| Effective date, i (If an effective days after the Note: If the day | if other than the date of filing: April 1, 2016 date is listed, the date must be specific and canifiling.) te inserted in this block does not meet the applicable effective date on the Department of State's records | le statutory filing requiremer | |
| Having been no | amed as registered agent to accept service of proce I am familia r with an d accept the appointment as r | ess for the above stated corp | |
| | | <u> </u> | March 7, 2016 |
| I submit this do | Required Signature/Registered Agent ocument and affirm that the facts stated herein are Department of State constitutes a third degree felo | SHN E DNCA re true. I am aware that the ony as provided for in s.817. | Date false information submitted in a 155, F.S. |
| 0 | | | March 7, 2016 |
| Keq | uired Signature/Incorporator | E DNA | Date |

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