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DATE: 6/14/17

NAME: JUSTIN MARTYR ACADEMICS INC.

TYPE OF FILING: ARTICLES

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ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Abbie Hodge

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

ARTICLE I NAME

The name of the corporation shall be: JUSTIN MARTYR ACADEMICS INC.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

5753 HWY 85 NORTH #5095

CRESTVIEW, FL 32536

Mailing address, if different is:

5753 HWY 85 NORTH #5095

CRESTVIEW, FL 32536

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any lawful act or activity for
which corporations may be organized.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CANDIDA MOSS/ DIRECTOR

Address: 5753 HWY 85 NORTH #5095

CRESTVIEW, FL 32536

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ 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: CANDIDA MOSS
Address: 5753 HWY 85 NORTH #5095
CRESTVIEW, FL 32536

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CANDIDA MOSS
Address: 5753 HWY 85 NORTH #5095
CRESTVIEW, FL 32536


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

7/14/17

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

7/14/17

Date

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