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Florida Department of State
Division of Corporations
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DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
REGISTRATION SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION
JTD Enterprises Consulting, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	02
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N. SAMS
MAR 22 2018

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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: JTD ENTERPRISES CONSULTING, INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

116 NINA WAYOLDSMAR, FL 34677**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

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ARTICLE IV SHARESThe number of shares of stock is: 1,000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: DENI NIHRA - D, P, TName and Title: THOMAS E. NIHRA, D, VP, SAddress: 116 NINA WAYAddress: 116 NINA WAYOLDSMAR, FL 34677OLDSMAR, FL 34677

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: THOMAS E. NIHRA
 Address: 116 NINA WAY
 OLDSMAR, FL 34677

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ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

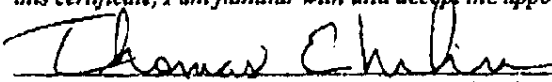
Name: THOMAS E. NIHRA
 Address: 116 NINA WAY
 OLDSMAR, FL 34677

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 days prior or 90 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

March 21, 2018

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

March 21, 2018

Date