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Phone : (554)428-6891
Fax Number : (554)428-6899

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Email Address: 311LUPT@GMFINGROUP.COMFLORIDA PROFIT/NON PROFIT CORPORATION
JMK SERVICES, INC. FINANCIAL

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Abbreviations:

HS: Host send
HR: Host receive
WS: Waiting send

PL: Polled local
PR: Polled remote
MS: Mailbox save

MP: Mailbox print
RP: Report
FF: Fax Forward

CP: Completed
FA: Fall
TU: Terminated by user

TS: Terminated by system
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January 9, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

GM FINANCIAL GROUP

SUBJECT: JMK SERVICES, INC.
REF: W19000002263

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Nadira D McClees-Sams
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FAX Aud. #:
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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME JMK FINANCIAL SERVICES, INC.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address _____ Mailing address, if different is: _____
739 PINE LAKE DRIVE _____
DELRAY BEACH, FL 33445 _____

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

ARTICLE IV SHARES 1000
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JEFFREY M. KLUPT, PRES. Name and Title: _____
Address: 739 PINE LAKE DRIVE Address: _____
DELRAY BEACH, FL 33445 _____

19 JAN-8 PM 4:27
STANLEY
739 PINE LAKE DRIVE
DELRAY BEACH, FL 33445

Name and Title: BARBARA KLUPT, DIRECTOR Name and Title: _____
Address: 739 PINE LAKE DRIVE Address: _____
DELRAY BEACH, FL 33445 _____

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 (F.O. Box NOT acceptable) of the registered agent is:

Name: BARBARA KLUPT
 Address: C/O GM FINANCIAL GROUP LIMITED INC
 1499 W PALMETTO PARK RD #130, Boca Raton FL 33486

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JEFFREY M. KLUPT
 Address: 739 PINE LAKE DRIVE
 DELRAY BEACH, FL 33445

FIL. SD

19 JAN -8 PM 4:28

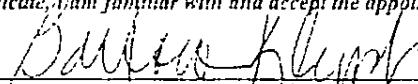
SUSAN L. ANDERSON
ALLSTATE, FLORIDA**ARTICLE VIII EFFECTIVE DATE:**

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

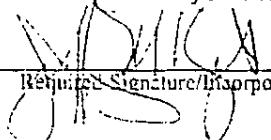


Required Signature/Registered Agent

1/10/19

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

1/10/19

Date