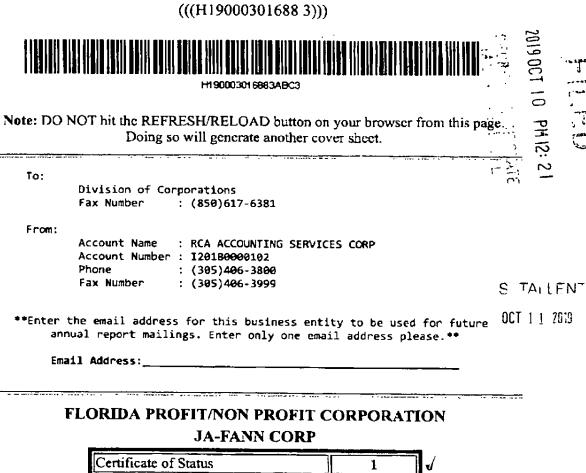
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October 9, 2019

## FLORIDA DEPARTMENT OF STATE

Division of Corporations

RCA ACCOUNTING SERVICES CORP

SUBJECT: PO1000112236 JAFANN CORP

REF: W19000089896

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.

The name of the entity listed on the fax cover sheet and the name of the entity listed in the document must be identical. Please amend the document or the fax cover sheet accordingly.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If you have any further questions concerning your document, please call (850) 245-6052.

Marti Simmons Regulatory Specialist II New Filing Section FAX Aud. #: E19000297664 Letter Number: 819A00020734

## **AFFIDAVIT**

BEFORE ME, the undersigned authority, on this day personally appeared FANNY VIGUERAS who after being firstly duly sworn, under oath, deposes and says:

- 1. The undersigned is also the sole Director and the President of JA-FANN CORP, a Florida corporation to be filed with the Florida Department of State on or about 11/20/2001.
- The undersigned hereby consents to and authorizes the use by JA-FANN CORP of the name JA-FANN CORP. The undersigned has personal knowledge of the fact and matter set forth herein and therefore has no intentions of reinstating the dissolved entity.

FURTHER AFFIANT SAYETH NAUGHT.

STATE OF FLORIDA

SS:

COUNTY OF MIAMI-DADE)

PERSONALLY appeared before me, FANNY VIGUERAS, who is personally known to me, who being by my first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

Witness my hand and official seal this 1st day of October, 2019.

STEPHANIE MARTINEZ
Notary Public - State of Florida
Commission # GG 276:107
My Comm. Expires hov 13, 2022
Bonded through National Notary Asse.

Notary Public Signature

## ARTICLES OF INCORPORATION

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

<u>TICLEJI PRIN</u>	CIPAL OFFICE Principal <u>street</u> address		Mailing address, if different is:  820 NW 135TH CT	
NW 135TH CT		820 NW		
IAMI, FL 33182		MIAMI, FL 33182		
TICLE III PURF e purpose for which	OSE the corporation is organized is:	THER PROFESSION	AL AND TECHNICAL SERVICES	
		·		
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		<del></del>	77 ( 24	
	IAI OFFICERS ANDWOD DIBECTOR	c		
Name and Ti	IAL OFFICERS AND/OR DIRECTOR VIGUERAS, FANNY (PD)		RODRIGUEZ, JAVIER (VP)	
Name and Tit	de: VIGUERAS, FANNY (PD)		RODRIGUEZ, JAVIER (VP) 820 NW 135TH CT	
	de: VIGUERAS, FANNY (PD)	Name and Title		
Address	MLAMI, FL 33182	Name and Title Address:	820 NW 135TH CT MIAMI, FL 33182	
Address	820 NW 135TH CT MLAMI, FL 33182	Name and Title Address:  Name and Title	820 NW 135TH CT MIAMI, FL 33182	
Address  Name and Title	tle: VIGUERAS, FANNY (PD)  820 NW 135TH CT  MLAMI, FL 33182	Name and Title Address:  Name and Title	820 NW 135TH CT MIAMI, FL 33182	
Address  Name and Titl  Address	tle: VIGUERAS, FANNY (PD)  820 NW 135TH CT  MLAMI, FL 33182	Name and Title Address:  Name and Title Address:	820 NW 135TH CT MIAMI, FL 33182	

Name a	nd Title:	Name and Title:	
Addres		Address:	
ARTICLE VI	REGISTERED AGENT Torida street address (P.O. Box NOT acceptable) of	of the registered agent is:	
Name:	FANNY VIGUERAS	or and registered agent is.	
Address:	820 NW 135TH CT	_	
Traditys.	MIAMI, FL 33182	_	
		_	
ARTICLE VII	INCORPORATOR		
The name and s	ddress of the Incorporator is:		
Name:	FANNY VIGUERAS	<del>-</del>	
Address:	820 NW 135TH CT	_	
	MIAMI, FL 33182	-	
			•
ARTICLE VIII	EFFECTIVE DATE: f other than the date of filing:	(OPTION A)	
(If an effective	date is listed, the date must be specific and cann	ot be more than five days pri	or or 90 days after the
flling.)			
Note: If the dat the document's	te inserted in this block does not meet the applicable effective date on the Department of State's records.	e statutory filing requirements,	this date will not be listed as
Having been no	med as registered agent to accept service of proces	ss for the above stated corpora	tion at the place designated in
this certificate, i	am familiar with and accept the appointment as re	gistered agent and agree to act	in this capacity
* farmy /	guas		10/01/2019
	Required Signature/Registered Agent	<del>_</del>	Date
I submit this do document to the	cument and affirm that the facts stated herein are Department of State constitutes a third degree felo	true. I am aware that the fal ny as provided for in x.817.155	se information submitted in a . F.S.
* Com N	A Grants	y specimeny was no morrespon	10/01/2019
Regi	ared Signature/Incorporator	<del></del> _	Date