Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION JTB GLOBAL INVESTMENT, INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

ARTICLE I

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

ARTICLE I	NAME	, , , , , , , , , , , , , , , , , , , ,	011.)
The name of the co	orporation shall be: JTB GLOBAL II	NVESTMENT, INC	
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address		
Ę	3405 NW 36th St. Suite 211	Mailing	address, if different is:
7	/irginia Gardens, EL 33166		
-		 	
ARTICLE III	PURPOSE		
The purpose for wi	high the gomestics		
The purpose	of the corporation is to asset		
incorporated i	of the corporation is organized is: of the corporation is to engage in in this state"	any lawful activity for w	high corporations may be
,	und State		trial productions trial pe
ARTICLE IV	SHADES		
The number of share	s of stock is:100		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	TORS	
Address:	'S'JUNGIA LOMPS - PIACIAAA		
Address:	6405 NW 36th St. Suite 211 Virginia Gardens, El 33466	Address	
	Virginia Gardens, FL 33166		
Name and Titl	e;		
Address:		Name and Title:	
		Address:	
		_	
Name and Tist	-		
Address:	e:	Name and Title:	F6 9
, 144, 633.		A GOTASS:	<u>≥m</u> M
			<u> </u>
ARTICLE VI R	EGISTERED AGENT		The Train is
The name and Floric	la street address (P.O. Box NOT acceptable	of the registered name :	
	Anicia Iones	y a time registered agent (5)	(5) ∞
Address:	6405 NW 36th St. Suite 211	·····	. See
	Virginia Gardens, Fl. 33166	<u> </u>	24
ARTICLE VII I			
The name and addre	ss of the Incorporator is:		
Name;	Julieta Torres		
Address:	6405 NW 36th St. Suite 211	The state of the s	
	Virginia Gardens FL 33166		
Tavina hour somes.			
his certificate I am fo	as registered agent to accept service of proc amiliar with and accept the appointment as r	ess for the above stated corpora	ation at the place designated in
The contribute, a many	amiliar with and accept the appointment as r	egistered agent and agree to act	in this capacity
	111111	_	
	1/1/1/1		09/14/2020
	Required Signature/Registered Agent		0 ci /14/2020
submit this documen	nt and affirm that the family		Date .
ocument to the Denai	nt and affirm that the facti stated herein a timent of State constitutes a third device tele	re true. I am aware that the fa	lse information submitted in o
	riment of State constitutes a third degree felo	ony as provided for in s.817.155,	F.S.
	111/104		i i
	Required Signature/Incorporator		05/14/2020
	Required Signature/Incorporator		Dale