Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I20000000019

Phone : (305)552-5973 Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION JAGX2 INC

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

| ARTICLE 1 NAME: The name of the corporation is: | |
|---|---|
| JAGX2 INC | |
| ARTICLE II PRINCIPAL OFFICE: | |
| The principal street address and mailing address is: | |
| - 8724 Sonset de =#177 | |
| Miani, F1. 33173 | |
| ARTICLE III SHARES: The number of shares of stock is: / COT | |
| ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS: | |
| Jesus Andre Carcia | |
| Dawn Marre Garcia | |
| | ï |
| | |
| | - |
| | |
| ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: | |
| The name and Florida street address (PO Box not acceptable) of the registered agent is: | |
| Lesus Andre Garcia | |
| = 8724 Sunset de #177 | |
| MIANI, F1. 33173 | |
| ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: | |
| Lesos Andre Gracia | |
| 8724 SUNSET DR #177 | |
| MIAMI F1 33173 | |

Required Signatures:

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

Registered Agent

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.

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