

Florida Department of State
Division of Corporations
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Tab

Division of Corporations
Fax Number : (850) 617-6381

Fronti

Account Name : ALLSTATE CORPORATE SERVICES CORP
Account Number : I20040000031
Phone : (800)906-9220
Fax Number : (800)906-9880

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

E-mail Address:

**FLORIDA PROFIT/NON PROFIT CORPORATION
JML GLOBAL INC.**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

2020 DEC 10 FH 3:00

JOURNAL OF L

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: JML GLOBAL INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 \$78.75
Filing Fee Filing Fee
 & Certificate of Status

\$78.75 \$87.50
Filing Fee Filing Fee.
 & Certified Copy Certified Copy
 Status & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: **ALLSTATE CORPORATE SERVICES CORP.**
Name (Printed or typed)

2215 HENDRICKSON STREET, SUITE 1

Address

BROOKLYN, NY 11234

City, State & Zip

800-906-9220

Daytime Telephone number

FILING@ACS123.COM

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: JOSHUA LIPIS
Address: 231 174TH STREET, UNIT 2119
SUNNY ISLES BEACH, FL 33160

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOSHUA LIPIS
Address: 231 174TH STREET, UNIT 2119
SUNNY ISLES BEACH, FL 33160

7/10/2010 10:31:46

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

Josh Lipis

Required Signature/Registered Agent

12/01/20

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.

Josh Lipis

Required Signature/Incorporator

12/1/20

Date