Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:		5:	_
	Division of Corporations	=====	,
	Fax Number : (850)617-6381	\$3.	
From:	•		
	Account Name : LAZARUS CORPORATE FILING SERVICE, INC	· · · · · · · · · · · · · · · · · · ·	
	Account Number : I200000000019	SILORIO	
	Phone : (305)552-5973	골슬	
	Fax Number : (305)675-5944	÷.,	
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а	FLORIDA PROFIT/NON PROFIT CORPORATION JETMAX ASSOCIATES INC Certificate of Status		13 PH 2:

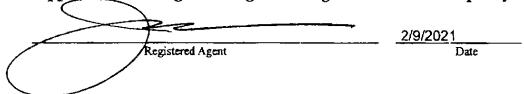
ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

JetMax Associates Inc	
ARTICLE II PRINCIPAL OFFICE:	2021 SALL
The principal street address and mailing address is:	LAHA LAHA
6000 NW 77th Court	<u></u>
Miami, FL 33166	
	08.1
	£.,, •
SHARES: The number of shares of stock is: 1,000	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICE	<u>irs:</u>
President - Joseph A DeMaria	
Sec/Treas - Dana DeMaria	
	<u> </u>
,	
ARTICLE V INITIAL REGISTERED AGENT AND STREET	ADDRESS:
The name and Florida street address (PO Box not acceptable) of the regis	
Joseph A DeMaria	
6000 NW 77th Ct	
Miami, FL 33166	
Mighii, FL 33100	
ARTICLE VI INCORPORATOR: The name and address of the Li	ecorporator is:
Joseph A DeMaria	
6000 NW 77th Ct	
Miami, FL 33166	

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



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.

