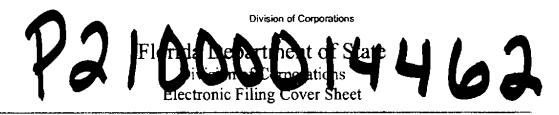
2/16/2021



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:

Page: 2 of 4

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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 JDICU Corp.

Certificate of Status	0
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Estimated Charge	\$78.75

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Corporate Filing Menu

Help



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o: 18506176381

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

TICLE II PRINCIPAL OFFICE			
Principal street address	Mailing address, if diffe	Mailing address, if different is:	
DI W. Big Beaver Road, Suite 500			
oy, Michigan 48084			
TICLE III PURPOSE			
e purpose for which the corporation is organiz	ted is: To engage in any activity within the purposes for w	thich corporatio	
ay be formed under the Florida Business Cor			
		<u>.</u>	
	· · · · · · · · · · · · · · · · · · ·		
			
RTICLE IV SHARES			
ne number of shares of stock is: 1,000			
e number of shares of stock is:			
RTICLE V INITIAL OFFICERS AND/OR			
RTICLE V INITIAL OFFICERS AND/OR	<u> DIRECTORS</u>		
RTICLE V INITIAL OFFICERS AND/OR			
Name and Title:	<u> DIRECTORS</u>		
Name and Title:	R DIRECTORS Name and Title:		
Name and Title:	R DIRECTORS Name and Title:		
Name and Title:	R DIRECTORS Name and Title:		
Name and Title:	Name and Title:Address:		
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19542080845

From: Ranae McGraw

Name and Title:		Name and Title:		
Address		Address:		
	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) o	fthe registered agent is:		
Name:	CT Corporation System			
Address:	1200 South Pine Island Road	_		
	Plantation, Florida 33324	_		
ADTICLEVII	INCORDOR (TOD			
·	INCORPORATOR dress of the Incorporator is:			
Name:	Anthony P. Cracchiolo			
Address:	201 W. Big Beaver Road, Suite 500	-		
, (33 , 23).	Troy, Michigan 48084	_		
Effective date, if ((If an effective date),	EFFECTIVE DATE: other than the date of filing:ate is listed, the date must be specific and cann	ot be more than five days prio	·	
	inserted in this block does not meet the applicable Tective date on the Department of State's records		his date will not be listed as	
	ed as registered agent to accept service of process similiar with and accept the appointment as registered. Candice Pignataro, Assistant Secretary Required Signature/Registered Agent	red agent and agree to act in this		
() ()			Date	
	ument and affirm that the facts stated herein are spartment of State constitutes a third degree felor			
1	whomen the	5	2/15/2021	
Required Signatur	e/Incorporate Anuntify P. Cracchiolo	Date	2021 FEB	
			5	
			<u> </u>	
			11. 11. 11.	