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Florida Department of State

Division of Corporations

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

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 MAR 11 PM 6:27

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FLORIDA PROFIT/NON PROFIT CORPORATION JAG ENTERTAINMENT INC.

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D. O'KEEFE

MAR 14 2022

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March 14, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CAPITOL SERVICES, INC.

SUBJECT: JAG ENTERTAINMENT INC.
REF: W22000032997

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet. We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin
Regulatory Specialist IIFAX Aud. #: H22000092513
Letter Number: 922A00005984

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COVER LETTER

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

SUBJECT: JAG Entertainment 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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Capitol Services - Corporate Filings Team

Name (Printed or typed)

515 East Park Avenue 2nd Fl

Address

Tallahassee, FL 32301

City, State & Zip

(855) 498 - 5500

Daytime Telephone number

jgeffen@pragermetis.com

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

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

H22000095679

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

ARTICLE I NAME

The name of the corporation shall be: JAG Entertainment Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4300 Bayview Drive

Fort Lauderdale, FL 33308

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Public relations

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TALLAHASSEE, FLORIDA

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ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JoAnn Geffen, President

Name and Title: JoAnn Geffen, Secretary

Address: 4300 Bayview Drive

Address: 4300 Bayview Drive

Fort Lauderdale, FL 33308

Fort Lauderdale, FL 33308

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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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: JoAnn Geffen
Address: 4300 Bayview Drive
Fort Lauderdale, FL 33308

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JoAnn Geffen
Address: 4300 Bayview Drive
Fort Lauderdale, FL 33308


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.

Required Signature/Registered Agent  3/9/22
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.

Required Signature/Incorporator  3/9/22
Date

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TALLAHASSEE, FLORIDA

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