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Florida Department of State
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.
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****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
JAZMIN ARJONA APRN, INC.**

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

2022 SEP 30 PM 4:48

2022 SEP 30 PM 4:48

2022 SEP 30 PM 1:02

ARTICLES OF INCORPORATION
In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

JAZMIN ARJONA APRN, INC.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

15252 SW 60 LANE

MIAMI, FL 33193

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

JAZMIN ARJONA, PRESIDENT

2022 OCT 01 11:02

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

JAZMIN ARJONA

15252 SW 60 LANE

MIAMI, FL 33193

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

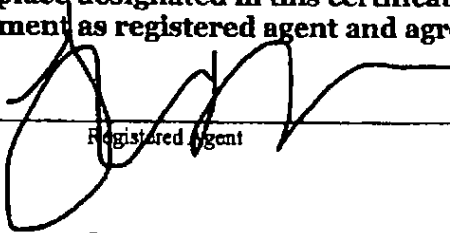
JAZMIN ARJONA

15252 SW 60 LANE

MIAMI, FL 33193

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

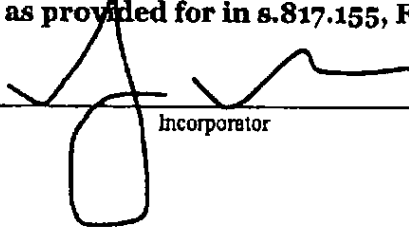


 Registered Agent

 Date

9/30/22

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.



 Incorporator

 Date

9/30/22

2022 09 30 17:02