Division of Corporations

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:

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Account Number : 120000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

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FLORIDA PROFIT/NON PROFIT CORPORATION JC MULTISERVICE GROUP, INC.

| | Manifestor on the contract of |
|-----------------------|---|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 03 |
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Electronic Filing Menu Corporate Filing Menu

Help

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

| ARTICLE I NAME The name of the corpora | ation shall be: JC MULTISERVICE G | ROUP, INC. | |
|--|---|------------------------|----------------------------------|
| ARTICLETI PRINC | | Mailing addre | is, if different is: TAPT 202 |
| HIALEAH, FL 33016 |) | HIALEAH, FL 33016 | 17011202 |
| | | | |
| ARTICLE III PURP | OSE ANY AN | ID ALL LANAGUE DITOLAG | .00 |
| The purpose for which | the corporation is organized is: ANY AN | ID ALL LAVIPOL BUSINE | :55 |
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| | | | |
| ARTICLE IV SHAR | ES Stock is: SHARES: 100 @ \$1.00 | | |
| The number of shares of | slock is: 01/A/CO. 100 @ 51,00 | 1 | |
| ARTICLE V INTL | AL OFFICERS AND/OR DIRECTORS | | • |
| Name and Title | JORGE A. CRUZ EXPOSITO - P | Name and Title: | |
| Address | 2205 11/741 STDEET ADT 000 | val | |
| . Iden oss | HIALEAH, FL 33016 | | - · |
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| Address | Address: | | |
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| | <u>GISTERED AGENT</u> ida street address (P.O. Box NOT acceptable) of the registered age | ent is: | |
| | JORGE A. CRUZ EXPOSITO | | |
| • | 2305 W 74th STREET APT 202 | | |
| - | HIALEAH, FL 33016 | | |
| ARTICLE VII IN | CORPORATOR | | |
| The name and addi | ess of the Incorporator is: | | |
| Name: | JORGE A. CRUZ EXPOSITO | | |
| Address: | 2305 W 74th STREET APT 202 | | |
| | HIALEAH, FL 33016 | | |
| ARTICLE FIII E | FFECTIVE DATE: | N | |
| (If an effective date filing.) | er than the date of filing: | 'HONAL) ive days prior or | 90 days after the |
| | serted in this block does not meet the applicable statutory filing rective date on the Department of State's records. | equirements, this c | late will not be listed as |
| | as registered agent to accept service of process for the above stated iliar with and accept the appointment as registered agent and agre | | |
| 10 10 10,707 16 18 I | | | · 3 |
| | Required Signature/Registered Agent | | : Date OF |
| | ent and affirm that the facts stated herein are true. I am aware artment of State constitutes a third degree felony as provided for it | | Cormation submitted in a |
| Joyg | or . | | : + 73 |
| Required Signature/ | | Date | ည |