Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : TAP SOLUTIONS INC

Account Number : I20210000103

Phone : (786)615-3057

Fax Number

: (786)615-3058

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

Ema11	Address:		

FLORIDA PROFIT/NON PROFIT CORPORATION JYS BEHAVIOR CORP

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

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

CLE II PRI	NCIPAL OFFICE		
	Principal street address	Mailing as	idress, if different is:
7 MONROE ST			
LLYWOOD, FL 3	33020		
<u>IÇLE III PUR</u>	POSE		
	h the corporation is organized is: ANY ANE	ALL LAWFUL BUSINES	S ACTIVITY
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Name and Title:		Name and Title:	
Address		Address:	
			
ARTICLE VI Ri	EGISTERED AGENT rida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	TAP SOLUTIONS INC		
Address:	2341 NW 7TH ST	_	
-	MIAMI, FL 33125	_	
ARTICLE VII IN	NCORPORATOR		
The name and add	ress of the Incorporator is:		
Name:	JENNIFFER YEPEZ - PRESIDENT	_	
Address:	1907 MONROE ST	_	
	HOLLYWOOD, FL 33020	_	
ARTICLE VIII E	FFECTIVE DATE:	(OPTIONAL)	
(If an effective dat filing.)	her than the date of filing: e is listed, the date must be specific and can:	not be more than five days prior or 90 days aft	er the
	serted in this block does not meet the applicab ective date on the Department of State's record	le statutory filing requirements, this date will not s.	be listed as
	l as registered agent to accept service of process uiliar with and accept the appointment as regist	for the above stated corporation at the place designered agent and agree to act in this capacity	nated in this
	(equal)	o4/28/2	3
	Required Signature/Registered Agent	Date	
	nent and affirm that the facts stated herein are partment of State constitutes a third degree felo	e true. I am aware that the false information su ny as provided for in s.817.155, F.S.	bmitted in a
Required Signature	iffer Heber	Date 04 28 Z	3