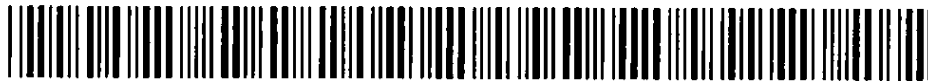


Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000213107 3)))



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To:

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

From:

Account Name : JTAX CORP
Account Number : I20200000009
Phone : (954)544-1000
Fax Number : (954)678-4500

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

Email Address: HELLO@JTAXCORP.COM

RECEIVED

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REGISTRARS
COMMERCIAL
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**FLORIDA PROFIT/NON PROFIT CORPORATION
RODMEN CORP**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

2023 JUN 13 PM 12:52
FLORIDA DEPARTMENT OF STATE
TAMM HASTEE | FL

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CR

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: RODMEN CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address
3131 NE 1ST AVE APT 2611
MIAMI FL 33137Mailing address, if different is:
SAME**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: RODRIGO BRANDAO MENA BARRETO - PRESIDENTAddress ALAMEDA IRAE 302 APT 11
MOEMA SP 04075-000

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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 CLERK OF STATE
 TALLAHASSEE, FL

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:Name: JTAX CORPAddress: 23123 STATE RD 7 STE 315BOCA RATON, FL 33428**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: JTAX CORPAddress: 23123 STATE RD 7 STE 315BOCA RATON, FL 33428**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

06/13/2023

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 §817.155, F.S.*_____
Required Signature/Incorporator

06/13/2023

Date

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 DEPT OF STATE
 TALLAHASSEE, FL
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