

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088

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

Email Address: TFG1442@YAHOO.COM

## FLORIDA PROFIT/NON PROFIT CORPORATION

## Jerakos International Inc

Certificate of Status	1
Certified Copy	0
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## ARTICLES OF INCORPORATION

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

the name of the corporation shall be: Jerakos		akos International Inc	s International Inc	
<i>TCLE II PRII</i> arv Hill Drive	NCIPAL OFFICE Principal <u>street</u> address 24	Mailing ac	ddress, if different is:	
TCLE III PUR purpose for whic	POSE  h the corporation is organized is: Any Lega			
CLE IV SHA	<u>RES</u> 1 500 at No Par Value			
ICLE V INIT	RES of stock is: 1,500 at No Par Value  TAL OFFICERS AND/OR DIRECTORS itle: Jeffery G Scott - President/Director			
ICLE V INIT	TAL OFFICERS AND/OR DIRECTORS	Name and Title:		
Name and T Address	IAL OFFICERS AND/OR DIRECTORS  Itle: Jeffery G Scott - President/Director 6 Gary Hill Drive  Rochester, NY 14624	Name and Title:Address:		
Name and T Address	IAL OFFICERS AND/OR DIRECTORS  itle: Jeffery G Scott - President/Director  6 Gary Hill Drive	Name and Title: Address:  Name and Title:		
Name and T Address Name and Ti Address	Ital: Jeffery G Scott - President/Director 6 Gary Hill Drive Rochester, NY 14624	Name and Title:  Address:  Name and Title:  Address:	2023 AUS 10 SECRETAR TALUAHA	
Name and T Address Name and Ti Address	AL OFFICERS AND/OR DIRECTORS  Sitle: Jeffery G Scott - President/Director 6 Gary Hill Drive  Rochester, NY 14624	Name and Title:  Address:  Name and Title:  Address:	2023 AUS 10 SECRETARY TALLAHAS	
Name and T Address Name and Ti Address	Ital: Jeffery G Scott - President/Director 6 Gary Hill Drive Rochester, NY 14624	Name and Title:  Address:  Name and Title:  Address:  Name and Title:  Name and Title:	SECRETARY OF TALLIAHASSEE	

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Name an	d Title:	Name and Title:	
Address		Address:	
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) o	of the registered agent is:	
Name:	Hubco Registered Agent Services, Inc.	<del></del>	
Address:	155 Office Plaza Drive, 1st Floor		
	Tallahassee, FL 32301		
ARTICLE VII	<u>INCORPORATOR</u>		
The name and ac	Idress of the Incorporator is:		
Name:	Jeffery G Scott	_	
Address:	6 Gary Hill Drive		
	Rochester, NY 14624	<del></del> -	
(BTICLE VIII	EFFECTIVE DATE:		
Effective date, if	other than the date of filing:late is listed, the date must be specific and can	(OPTIONAL) not be more than five days prio	r or 90 days after the
	inserted in this block does not meet the applicable frective date on the Department of State's records		his date will not be listed as
	ned as registered agent to accept service of process amiliar with and accept the appointment as regist		
S-b. An	this		August 9, 2023
Required Signatur	re/Registered Agent Bruce B. Hubbard		TO Dail
	rument and affirm that the facts stated herein ar Department of State constitutes a third degree felo		
Deffer	y GSwoll _		August 9, 2023
Regulared Bignatu	re/Incorporator Jeffery G Scott		m-spate K
			TATE