Division of Corporations Electronic Filing Cover Sheet

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īo:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I200000000019 : (305)552-5973 Phone : (305)675-5944 Fax Number

**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 JM REASONS.CORP

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 1 |
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Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE J. NAME: The name of the corporation is:

| JM Reasons. Corp |
|---|
| ARTICLE II PRINCIPAL OFFICE: |
| The principal street address and mailing address is: 316 Ponte Vedra Rd, Rom Springs Fl., 33461 |
| ARTICLE III SHARES: The number of shares of stock is: \ \ O O |
| ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS: |
| Jany Domingulz (P) |
| |
| |
| ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: |
| The name and Florida street address (PO Box not acceptable) of the registered agent is: JANY DOMINGUEZ |
| JANY DOMINGUEZ 316 PONTE VEDRA RD PALM SPRINGS, FL 33461 |
| PALM SPRINGS, FL 33461 |
| ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: |
| Jany Dominguez 316 Parts Voda 127 Polm Springs |
| Fl 33461 |

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

Hegistered Agent Upate Upate

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 \$8.817.155, F.S.

Date