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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : JTAX CORP Account Number : 120200000009 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

## FLORIDA PROFIT/NON PROFIT CORPORATION BRUTUS HOME IMPROVEMENT INC

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

ARTICLE I NAM The name of the corpor	E BRUTUS HOME	E IMPROVEMENT INC	
ARTICLE II PRIN 4743 NW 5th AVE			address, if different is:
ARTICLE III PURI	POSE  the corporation is organized is: ANY AI	ND ALL LAWFUL BUSINESS	
ARTICLE IV SHAL	D.F.Y.		
The number of shares of	of stock is: 1000  IAL OFFICERS AND/OR DIRECTOR: LOSE ANTONIO MOREIRA MARTINS DE	<u>S</u> SOUZA - PRESIDENT	
Name and Tit	tle:		
Address	POMPANO BEACH FL 33064	Address:	
Name and Titl	c: JAYNE ALVES VILAS NOVAS - VICE PRE	SIDENT Name and Title:	
	4743 NW 5th AVE POMPANO BEACH FL 33064	Address:	
Name and Titl	c:	Name and Title:	202
Address		Address:	
			i e.

Page: 4 of 4 01/05/2024 5:23 PM Fax: (850) 617-6381 From: Jtax Corp Fax: 195467845001 Ťρ Name and Title: Name and Title: Address: Address ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: JTAX CORP Name: 23123 STATE RD 7 STE 315 Address: BOCA RATON, FL 33428 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: JTAX CORP Name: Address: 23123 STATE RD 7 STE 315\_\_\_ BOCA RATON, FL 33428 ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: 01/01/2024 \_. (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 01/05/2024 Required Signature/Registered Agent 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 s.817.155. F.S. Required Signature/Incorporator