

12/09/2024 10:27 AM

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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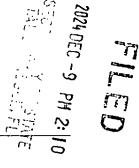
Account Name : JTAX CORP Account Number: I20200000009 Phone : (954)544-1000 : (954)678-4500 Fax Number

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HELLO@JTAXCORP.COM Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION O & P SOLUTIONS USA CORP

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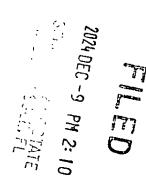
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Help

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

eren nois	CID 41 AEEICE		
CI,E II PRIN	CIPAL OFFICE Principal street address	Mailing address, if different is:	
Principal street address 2350 135th Street, Suite 810 North Miami,Fl			SAME
33181			
CLE III PURP	<u>OSE</u>		
irpose for which	the corporation is organized is:	<u>.</u>	<u> </u>
	<u> </u>	•	
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CLE IV SHAR	RES Estock is: 1000		
CLE IV SHAR unber of shares of	<u>PES</u> *stock is: 1000		
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Name an	d Title:	Name and Title:	
Address		Address:	
	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable) o	of the registered agent is:	
Name:	JTAX CORP	_	
Address:	10055 YAMATO RD STE 206	_	
	BOCA RATON, FL 33498	_	
ARTICI,E VII	INCORPORATOR		
The name and ad	Idress of the Incorporator is:		
Name:	JTAX CORP	_	
Address:	10055 YAMATO RD STE 206	_	
	BOCA RATON, FL 33498		
Effective date, if (If an effective d filing.) Note: If the date	EFFECTIVE DATE: other than the date of filing: ate is listed, the date must be specific and cann inserted in this block does not meet the applicable	ot be more than five days prio	
the document's el	ffective date on the Department of State's records		
	ed as registered agent to accept service of process amiliar with and accept the appointment as registe		
		. <u></u>	12/4/2024
	Required-Signassiz Registered Agent		Date
	ument and affirm that the facts stated herein are Department of State constitutes withink degree felor		
			12/4/2024
Required Signatu	re/Incorporator	Date	



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