

From: Jtax Corp

1/30/25, 4:19 PM

Fax: +18546784500

To:

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Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

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

From:

Account Name : JTAX CORP
Account Number : I202000000009
Phone : (954)544-1000
Fax Number : (954)678-4500

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

****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 GFM LOGISTICS CORP

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

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

ARTICLE I NAME

The name of the corporation shall be: GFM LOGISTICS CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

10055 YAMATO RD
BOCA RATON FL 33498

Mailing address, if different is:

59 MERCER ST
TOWNSHIP, NJ 07734

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: NICOLE WALTON - CEO

Name and Title:

Address: 59 MERCER ST

Address:

TOWNSHIP, NJ 07734

Name and Title:

Address:

Name and Title:

Address:

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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 CORP
Address: 10055 YAMATO RD STE 206
BOCA RATON, FL 33498

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

Name: JTAX CORP
Address: 10055 YAMATO RD STE 206
BOCA RATON, FL 33498

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 01/30/2025
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 01/30/2025
Date

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