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P.O. Box 352016 Miami, Florido 33135 OFFICE USE ONLY

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Examiner's Initials

# CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

Reinstatement Trademark

Other

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	Vill wait Photocopy  AMENDMENTS	Certified Copy		
Profit	Amendment			
NonProfit	Resignation of R.A., Officer/	Director		20.12
Limited Liability	Change of Registered Agent		. •	SEP 2019
Domestication	Dissolution/Withdrawal	-11	ARON L. TALA	
Other	Merger			
OTHER FILINGS	REGISTRATION/ QUALIFICATION	U	4 5	
Annual Report Fictitious Name	Foreign		502	
Notitions Ivality	Limited Partnership			

CR2E031(10/92)

Name Reservation

Miami, Florida September 20, 1995

Ms Sharon Tala State of Florida Department of Corp. Tallahassee, Florida

Dear Ms. Tala:

As promised, enclosed are the originals of the Articles of Incorporation for JMV SERVICES, Inc.

Thank you very much for your assistance!

Yours truly,

Maribel M. Roig

Agent for JMV Services, Inc.

I you read four how ?



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 14, 1995

IPSC P O BOX 352016 MIAMII, FL 33135

SUBJECT: PROFESSIONAL SERVICES CENTER, INC.

Ref. Number: W95000018498

We have received your document for PROFESSIONAL SERVICES CENTER, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Sin.ply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6904.

Freida Chesser Corporate Specialist

Letter Number: 995A00042288

### ARTICLES OF INCORPORATION

OF

#### JMV SERVICES, INC

ARTICLE I NAME

The name of this Corporation is JMV SERVICES, INC.

ARTICLE II -DURATION

This Corporation shall exist perpetually commencing on the date these Articles are filed.

ARTICLE III - PURPOSE

This Corporation is organized for the transaction of any and all lawful purposes.

ARTICLE IV. - CAPITAL STOCK.

This Corporation is authorized to issue five hundred shares of 1.00 par value, which said shares shall be designated as "Common Shares".

ARTICLE V. - INITIAL REGISTERED AND PRINCIPAL OFFICE AND AGENT.

The stree address of the initial registered and principal office of the Corporation is 782 N.W. 42 Avenue, Suite 429, Miami, Florida33126.

The name of the initial Registered Agent of this Corporation is, Juan Manuel Vizoso.

ARTICLE VI. - INITIAL BOARD OF DIRECTORS.

This Corporation shall have one (1) initial director. The number of directors may increase from time to time by the By-Laws, but shall never be less than one (1). The name and address of the initial director of this Corporation is:

Juan Manuel Vizoso 782 N.W. 42 Avenue, Suite 429 Miami, Florida 33126

# ARTICLE VII - INCORPORATOR

The name and address of the person signing these Articles is

Juan Manuel Vizoso 782 N.W. 42 Avenue, Suite 429 Miami, Florida 33126

ARTICLE VIII

This Corporation shall have all of the Corporate powers enumerated in the Florida General Corporation Act.

ARTICLE IX. - AMENDMENT

This Corporation reserves the right to amend, rescind, or repeal any provisions contained in these Articles of Incorporation, and amendment thereof, and any right conferred upon the shareholders herein to this reservation.

ARTICLE X. - INDEMNIFICATION.

This Corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation, this <u>September 5</u>, 1995.

JUAN MANUEL VIZOSO

DIRECTOR

STATE OF FLORIDA) SS COUNTY OF DADE)

BEFORE ME, a notary public authorized to take acknowledgement in the State and County set forth above, personally appeared JUAN MANUEL VIZOSO, D/L.  $\sqrt{220-43360-43360}$  who have identified himself to me, and who have executed the foregoing Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this 5th day of September, 1995.

MARIBEL M. ROIG

NOTARY PUBLIC, STATE OF FLORIDA

AT LARGE

My Commission Expires:

MARIBEL M. ROIG Notary Public, State of Florida My comm. expires Feb. 16, 1999 No. CC439363 Bonded thru Ashton Agency, ter

## ACKNOWLEDGEMENT:

Having been named as Registered Agent to accept service of process for the above stated Corporation, at a place designated in these Articles of Incorporation, I hereby agree to act in that capacity, to comply with the provisions of Florida Statutes Section 48.091 and any amedments thereto, and to comply with the provisions of all other Statues related to the proper and complete performance of my duties.

IN WITNESS WHEREOF, I have hereunto set my hand this 5th day of September, 1995.

JUAN MANUEL VIZOSO

Registered Agent.

Typed or printed name of signing officer or director \_

APPLICATION	FLORIDA DEPARTMENT OF STAT		DO NOT WRITE IN THIS SPACE	
FOR	Jim Smith			
REINSTATEMENT Secretary of State DIVISION OF CORPORATIONS		FILED		
✓ Make Check Payable To		96 NO	/ 13 PM 3: 09	
1. Name and Mailing Address of Corporation. DOC  JMV Services,	TUL	2. If Address in the address AddwAn by thing the another	du al fairmeire hart way, enter the corre	
4303 N.W. 7h. 、	Street Suite C	Addross	7	
MiAMI, FL 331	26	Address		
		City and State		
		City and State	TEMENTO	
Date Incorporated or Qualified     To Do Business in Fjorida	L	El Number Applied Foi	5. \$8.75 Additional Fee required for a Certificate of Status	
09/20/1995		El Number Not Applicable	CERTIFICATE OF STATUS DESIRED	
G. Names and Street Addresses of Each Office: and/or D				
Title and/or Directors	Street Address of Er Officer and/or Direct 3 (Do NOT Use Post Office Bo	tor x Numbers) 4	City and State	
P/s/T/2 Trans de Vie			1-	
"ID JUAN IT. VIZO	050 4303 N.W. 7th Stra	et Jule C. M	TAMI T-L 33126	
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REGISTERED AGENT INFOR	MATION 8	Name and Address of Nev	v Registered Agent and/or Office	
Name and Address of Current Regis		•		
JUAN M. Vizoso	Street Address	Do NOT Use P.O. Box Nu	mber)	
4303 N.W. 7th Str	est Suite C Street Address	Do NOT Use P.O. Box Nur	nber)	
Minmi, FLORIDA 3	3/26 City and State			
9. 1, being appointed the registered seet of the above name	ned corporation, am familiar with and accept the ot	oligations of Section 607.05	05. F.S.	
Signature of Registered Agent REGIST	ERED AGENT MUST SIGN	Date	11/11/96	
10. If this corporation is a non-profit	t with I.R.S. 501(c)(3) tax exem	npt status, check	this box (See other side for additional information.)	
<ol> <li>Does this corporation pay any Dept. of Revenue under S. 199</li> </ol>	intangible tax to the 9.032, Florida Statutes. Yes	□ No 🗹	(See other side for information on intangible tax.)	
I certify that I am an officer or director or the receiver of this reinstatement application the reason for dissolution lees owed by the corporation have been paid. The information of the corporation have been paid.	r trustee empowered to execute this application as			
Signature of Officer or Director	- Odal "	2 <i>9(_</i> _		
Typed or printed name of signing officer or director	JUAN M. Vizoso	Daytime Phot	ne #	