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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32214

| (Pro                           | posed corporate                      | name - must include sui                               | Iffix)                               | · 5  |
|--------------------------------|--------------------------------------|---|--------------------------------------|--|
| Enclosed is an original a for: | nd one (1) co                        | Ppy of the articles of                                | incorporation an                     | d a check                                  |
| S70.00 Filing Fee              | \$78.75<br>Filing Fee<br>Certificate | \$122.50 Filing Fee & Certified Copy  Additional Copy | \$131.25 Filling Fee, Certified Copy |  |
| FROM:                          | JOHN<br>Name (s                      | Y. HISHI  | MEH                                  |  |
| -                              | 8641                                 | SW 16. Address  | COURT                                |  |
| -                              | PEMBI<br>City,                       | ROKE PINE<br>State & Zip                              | S, FL. 3.                            | 3025                                       |
|                                | 954<br>Daytime Te                    | 436 – OOE<br>elephone number                          | 200C<br>-01/10/<br>****13            | 001684362<br>9601070003<br>1.25 ****131.25 |

NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCOPPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

The name of the corporation shall be: ARTICLE I THE JOHN/JAKI GROUP, INC.

**ARTICLE II** PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:

10031 PINES BLVD SUITE 215 PEMBROKE PINES FL. 33024

ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time

1000 SHARES - NO PAR

**ARTICLE IV** INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

> JOHN Y. HISHMEH 8641 SW 16 COURT PEMBROKE PINES, FL. 33025

## INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

JOHN Y. HISHIMEH 50% PRES. 8641 SW 16 CT. PENBROKE PINES FL. 33025

VACQUETINE HISHMEN 50% 8641 SW 16 CT. PEMBROKE PINES FL. 33025

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

5TH day of TANUARY, 1996.

Jacqueline Hishart

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

| 1, | The name of the corporation is: THE JOHN JAKI GROUP, INC.         |
|----|---|
|    | THA INCOME TAX SPECIALISTS  |
| 2. | The name and address of the registered agent and office is:       |
|    | JOHN Y. HISHMEH   |
|    | (NAME)  8641 SW 16 CT  (P.O. Box or Mail Drop Box NOT ACCEPTABLE) |
|    | PEMBROKE PINES FL. 33025  |

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Dolny. Hismel 1/5/96
(SIGNATURE) (DATE)