P98000 468 ANY 26 PH 3: 28 May ly Jacobson Requestor's Name 370 4 Winces Foot Gircle Address Green Con Jacobs, FC. 32043

Office Use Only

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

| 1. | | Corporation | NT | 71 M 1945, 5 1 - 1 | - <u></u> | | <u> </u> | | | |
|---------|-------------|---------------|-------------|---------------------|-----------|----------|---------------|-----------------------|-----------|-------------------------------|
| 2. | · | согрогацоп | Name) | | (Docum | ent #) | | _ | | |
| ۷. | (0 | Corporation | Name) | <u> </u> | (Docum | ent#) | | | | |
| 3. | | | | | | - | 2000 |))))) | 35 | 722 <u>-</u> : |
| | ((| orporation | Name) | | (Docum | ent#) | - | ******78. | 75 | 1002—UU ******78 |
| 4. | | Corporation . | - Name) | | <u> </u> | | <u> </u> | | | |
| | (0 | orporation: | ivanie) | | (Docum | eni#) | | | | |
| | Walk in | Picl | k up time | | | Certifi | ed Conv | | 98 | S |
| | Mail out | | wait | Photoco | ру | | cate of Sta | atus | 98 MAY 26 | SECRETA DIVISION OF |
| NEW | FILINGS | | AMENT | MENTS | | | | | - P | \$ 50 |
| Profit | | | Amendmer | nt | | | | | ယ္ | ORA |
| NonPro | ofit | | Resignation | n of R.A., Officer/ | Director | | | | 3: 28 | CO OF STATE ORPORATIONS |
| Limited | d Liability | | Change of I | Registered Agent | | 7 | | | | O) |
| Domes | tication | | Dissolution | /Withdrawal | | | - | | | |
| Other | | | Merger | | | | | A NO. | 8 |) 3 ***** |
| OTH | er filings | | REGI | STRATION/ | | _ | | LAHASS | MAY 26 | m |

Annual Report

Fictitious Name

Name Reservation

| | REGISTRATION/- QUALIFICATION |
|---|------------------------------|
| • | Foreign |
| | Limited Partnership |
| | Reinstatement |
| | Trademark |
| | Other |

B MAY 26 PM 3: 24

EPARTIMENT OF STATE
SION OF CORPORATIONS
LLAHASSEPPORATIONS

Examiner's Initials

Form B. Articles of Incorporation - Professional Association

Articles of Incorporation

| Professional Association |
|--|
| 1. The name of the corporation is: JMAS GROUP, P.A. |
| 2. The purpose for which this corporation is organized is FOR THE STATES OF NULSE PRACTITION CA. |
| 3. The principal place of business and mailing address of the corporation is a state wind for Circle |
| Cores Cove Speines, FL 32043 |
| 4. The corporation shall have the authority to issue 100 shares of coromored stock, in one class only, each with a par value of \$ |
| 5. The registered agent of the corporation is MARY KAY JACOSSEN and the registered address is 3704 Winged FOOT CIRCLE, GREEN COVE Speing Florida FL. |
| 6. The initial Board of Directors shall have member(s) whose name(s) and address(es) is/are as_follows: MARY KAY JACOBSEN |
| ALYSON HYN WARREN |
| The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one. |
| 7. The incorporator of this corporation is HARY KAY TACOSEN whose address is 3704 Winged FOOT CIRCLE, GREEN Cove Speins, FL |
| 32043 |
| Dated 4-26-98 Maykay Jachen |
| Incorporator / // |
| I-faving been named as registered agent and to accept service of process for the above stated |

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 am familiar with and accept the obligations of my position as registered agent.

Dateci 5-16-48