TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

CORPORATION

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee \$78.75

Filing Fee & Certificate

\$122.50

S131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

SIISPOOL Name (Printed or typed)

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

ARTICLES (OF	INCORPO	RATION
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FILED JUL 13 AM 10:01

The undersigned incorporator, for the purpose of forming a corporation under the Florida ALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

JSVP CORPORATION

ARTICLE II	PRINCIPAL	OFFICE
	FAMULIFAL	<i>UPPICE</i>

The principal place of business and mailing address of this corporation shall be:

2820 WORTH AVE 19/ewood FL 34224

SHARES

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

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

JAAK SIISPOOL

2820 WORTH AVE

ENGLEWOOD, FL

<u>ARTICLE</u> V

The name and address of the incorporator to these Articles of Incorporation are:

Worth Ave

Englewood FL 34224

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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 felating, to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent