

P99000026208

TRANSMITTAL LETTER

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

300002807629--8
-03/16/99--01046--008
*****78.75 *****78.75

SUBJECT: JaM Publishing, Corp.
(Proposed Corporate Name)

Enclosed is and original and one (1) copy of the articles of incorporation and a check for \$ 78.75

 \$70.00 Filing Fee
XX \$78.75 Filing Fee & Certificate
 \$122.50 Filing Fee & Certified Copy*
 \$131.25 Filing Fee, Certified Copy & Certificate*

* Additional Copy of Articles of Incorporation is required

FROM: Martin Mendiola
Name
3282 Riviera Dr.
Address
Coral Gables, FL 33134
City, State & Zip
305-445-2525
Daytime Telephone Number

FILED
99 MAR 16 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

me 3/23/99

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

JaM Publishing, Corp.

ARTICLE II PRINCIPAL OFFICE

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

**3282 Riviera Dr.
Coral Gables, FL. 33134**

ARTICLE III SHARES

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

One hundred thousand (100,000) shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

**Martin Mendiola
3282 Riviera Dr.
Coral Gables, FL. 33134**

ARTICLE VI INCORPORATOR

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

**Martin Mendiola
3282 Riviera Dr.
Coral Gables, FL. 33134**

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TALLAHASSEE, FLORIDA



Signature / Incorporator

3-12-99

Date

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.



Signature / Registered Agent

3-12-99

Date