

Division of Corporations

P2200002663

Florida Department of State
Division of Corporations
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TALLAHASSEE, FLORIDA

To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : JTAX CORP
Account Number : I20200000009
Phone : (954)544-1000
Fax Number : (954)678-4500

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: HELLO@JTAXCORP

FLORIDA PROFIT/NON PROFIT CORPORATION
3 STUDS CONSTRUCTION INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

2022 JAN 12 PM 4:22

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: 3 STUDS CONSTRUCTION INC

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address <u>8113 MIZNER LN</u> <u>BOCA RATON, FL 33433</u>	SAME	Mailing address, if different is: <hr/> <hr/>
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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

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ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>MATHEUS RODRIGUES HORST</u> <u>DIRECTOR</u> Address <u>8113 MIZNER LN</u> <u>BOCA RATON, FL 33433</u>	Name and Title:	<u>JOEL HORST</u> <u>DIRECTOR</u> Address: <u>22751 SW 64TH WAY</u> <u>BOCA RATON, FL 33428</u>
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Name and Title: <u>JOHN GEORGE COPPOLA</u> <u>DIRECTOR</u> Address <u>19923 LATONA PL</u> <u>BOCA RATON, FL 33434</u>	Name and Title:	<hr/> <hr/>
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Name and Title: _____ Address _____ _____ _____	Name and Title:	_____ _____ _____
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Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: JTAX CORP

Address: 23123 FL-7 SUITE 315

BOCA RATON, FL 33428

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ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: NIRVANDO BATISTA

Address: 23123 FL-7 SUITE 315

BOCA RATON, FL 33428

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Required Signature/Registered Agent

01/12/2022

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

01/12/2022

Date