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Division of Corporations

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Fax Number : (850) 617-6381

From: Account Name : PEREZ ARCHE AN ACCOUNTING & SERVICES INC  
Account Number : I20070000033  
Phone : (305) 649-7040  
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Email Address: Aracaisabel@gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION  
APPEX PRO CORP

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**ARTICLES OF INCORPORATION**

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.

**ARTICLE I NAME**

The name of the corporation shall be:

**APPEX PRO CORP**

**ARTICLE II PRINCIPAL OFFICE**

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

**10795 NW 53 ST BAY #206  
SUNRISE, FL 33351**

**ARTICLE III SHARES**

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

**100 SHARES  
Distributed as follows:**

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

**ANA ISABEL ARAICA  
4011 W FLAGLER ST STE 501  
CORAL GABLES, FL 33134**

**ARTICLE V INCORPORATORS(S)**

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

**DONY ATTARA  
10795 NW 53 ST BAY #206  
SUNRISE, FL 33351**

**ARTICLE VI DIRECTOR(S)**

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

**DONY ATTARA  
10795 NW 53 ST BAY #206  
SUNRISE, FL 33351**

**PRESIDENT**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this June 4th, 2014.



\_\_\_\_\_  
SIGNATURE

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

The name of the corporation is:

**APEX PRO CORP**

- 1. The name and address of the registered agent and office is:

**ANA ISABEL ARAICA  
4011 W FLAGLER ST STE 501  
CORAL GABLES, FL 33134**

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN HIS 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 STATUES 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 *Araica*

DATE 06/04/14

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