

**Electronic Articles of Incorporation
For**

P15000007825
FILED
January 28, 2015
Sec. Of State
msolomon

DLOFIT, INC.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

DLOFIT, INC.

Article II

The principal place of business address:

2015 SW 25TH STREET
MIAMI, FL. 33133

The mailing address of the corporation is:

2015 SW 25TH STREET
MIAMI, FL. 33133

Article III

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The number of shares the corporation is authorized to issue is:

100

Article V

The name and Florida street address of the registered agent is:

DAVID LOPEZ
2015 SW 25TH STREET
MIAMI, FL. 33133

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: DAVID LOPEZ

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Article VI

The name and address of the incorporator is:

DAVID LOPEZ
2015 SW 25TH STREET

MIAMI, FL 33133

Electronic Signature of Incorporator: DAVID LOPEZ

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P
DAVID LOPEZ
2015 SW 25TH STREET
MIAMI, FL. 33134 US

Article VIII

The effective date for this corporation shall be:

01/30/2015

P15000007825

AFFIDAVIT OF DAVID LOPEZ

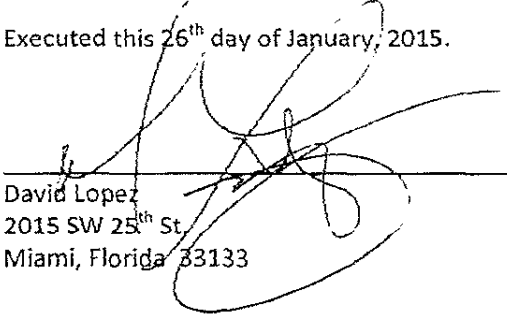
STATE OF FLORIDA
COUNTY OF MIAMI-DADE

The undersigned, DAVID LOPEZ, being first duly sworn, do hereby state under oath and under penalty of perjury that the following facts are true:

1. I am over the age of 18 and am resident of the State of Florida. I have personal knowledge of the facts herein, and, if called as a witness, could testify completely thereto.
2. I suffer no legal disabilities and have personal knowledge of the facts set forth below.
3. I have no intention of reinstating, therefore, releasing the name of DLO FIT, Inc. for use to another entity.

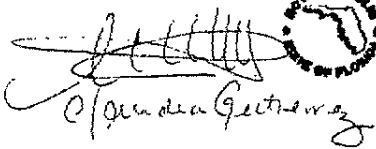
I declare that, to the best of my knowledge and belief, the information herein is true, correct, and complete.

Executed this 26th day of January, 2015.



David Lopez
2015 SW 25th St.
Miami, Florida 33133

State: Florida
County: Miami Dade
provided Florida Driver's License
1/27/15



Claudia Gutierrez
Notary Public
State of Florida
My Commission Expires 10/07/2017
Commission No. FF 80715