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From:

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

From:
Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (800)221-2972
Fax Number : (888)692-9256

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

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16 APR 13 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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16 APR 13 PM 1:49
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TALLAHASSEE FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION
ADS Capital Corp.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$70.00

4/14/16

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TALLAHASSEE, FLORIDA

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: ADS Capital Corp.

ARTICLE II PRINCIPAL OFFICE

Principal **street** address	Mailing address, if different is:
1200 WEST AVENUE, #516	
MIAMI, FL 33139	

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
To conduct all activities set forth and permitted under and Florida corporation law

ARTICLE IV SHARES
The number of shares of stock is: 200 No Par Value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Andrew Slome, DIRECTOR
Address: 1200 WEST AVENUE, #516
MIAMI, FL 33139

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

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: Andrew Slome

Address: 1200 WEST AVENUE, #516

MIAMI, FL 33139

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Andrew Slome

Address: 1200 WEST AVENUE, #516

MIAMI, FL 33139

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 business days prior or 90 business 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

X _____ 4/9/2016

Required Signature/Registered Agent 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.

X _____ 4/9/2016

Required Signature/Incorporator Date