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(Re	questor's Name)			
(Ad	dress)			
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(Cit	y/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Name)		
(Document Number)				
Certified Copies	_ Certificates o	f Status		
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SECRETARY OF STATE
NVISION OF CORPORATIONS

JUL 21 2015

T SCHROEDER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

35 OAK US 3, INC	J			
			, ,	
			✓_	Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
		ļ		L.C. File
				Fictitious Name File
				Trade/Service Mark
		·		Merger File
				Art, of Amend. File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
			<u> </u>	Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
			<u></u>	Officer Search
				Fictitious Search
Signature		· · · · · · · · · · · · · · · · · · ·		Fictitious Owner Search
B.101.01				Vehicle Search
				Driving Record
Requested by: BA	7/20/15			UCC 1 or 3 File
Name		Time		UCC 11 Search
Name	Date	THAC	<u> </u>	UCC 11 Retrieval
Walk-In	Will Pick Ur	า	1	Courier

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: 3	5 Oak US S	B, Tac.	
	(PROPOSED CORPORA	ATÉ NAMÉ – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for;
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	
from: <u>E</u>	van R Mardino,	Esg , c (Printed or typed)	
		Address	<u> </u>
	City,	State & Zip	
-	305 37123 Daytime T	-48 clephone number	
	Sm@3mlow_ E-mail address: (to be used	•	otification)

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

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

	operation shall be: 35 OAK US 3, INC.		
	INCIPAL OFFICE Principal sirect address Street, PH-104, miami, FL 33131	Mailing a	ddress, if different is:
		-	
ICLE III PUR purpose for whic	RPOSE the the corporation is organized is:	lawful business	
CIFIV SPA	IPFS		
umber of shares	of stock is:		SECR IVISION
umber of shares of control of shares of the control of share and Ti	of stock is: "IAL OFFICERS AND/OR DIRECTORS itle: WILLIAM WIENER, P, T, S, D	Name and Title:	<u> </u>
umber of shares	of stock is:		JUL STORE
umber of shares of the control of th	of stock is: CIAL OFFICERS AND/OR DIRECTORS WILLIAM WIENER, P. T. S. D C/O 48 EAST FLAGLER ST, PH-104	Name and Title:	JUL 20
CLE V INIT Name and Ti Address	of stock is: CIAL OFFICERS AND/OR DIRECTORS WILLIAM WIENER, P. T. S. D C/O 48 EAST FLAGLER ST, PH-104	Name and Title:Address:	JUL 20 AM 8: 00
CLE V INIT Name and Ti Address	of stock is: CIAL OFFICERS AND/OR DIRECTORS WILLIAM WIENER, P, T, S, D C/O 48 EAST FLAGLER ST, PH-104 MIAMI, FL 33131	Name and Title: Address: Name and Title:	JUL 20 AM 8: 00
CLE V INIT Name and Ti Address Name and Titl	of stock is: CIAL OFFICERS AND/OR DIRECTORS WILLIAM WIENER, P, T, S, D C/O 48 EAST FLAGLER ST, PH-104 MIAMI, FL 33131	Name and Title: Address: Name and Title: Address:	JUL 20 AH 8: 00
CLE V INIT Name and Ti Address Name and Titl Address	of stock is: CIAL OFFICERS AND/OR DIRECTORS itle: WILLIAM WIENER, P. T. S. D C/O 48 EAST FLAGLER ST, PH-104 MIAMI, FL 33131	Name and Title: Address: Name and Title: Address:	JUL 20 AM 8: 00

Name	and Title:	Name and Title:	
Addro	288	Address:	
A DESCRIPTION OF YOR	·		
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name;	EVAN R MARBIN, ESQ		
Address:	48 EAST FLAGLER STREET, PH-104		
	MIAMI, FL 33131		
ADDICE BANK		_	→ ₹
<u> MCHCLE VII</u>	INCORPORATOR		5 SEE
The <u>name and a</u>	iddress of the Incorporator is:		
Name:	EVAN R MARBIN, ESQ.	_	FIL OF C 20
Address:	48 EAST FLAGLER STREET, PH-104		R PC
	MIAMI, FL 33131		STATE JRATIO 8: 00
			0
	EFFECTIVE DATE: other than the date of filing:	(OPTIONAL)	
(If an effective of days after the fi	late is listed, the date must be specific and canno	ot be more than five business	days prior or 90 business
Note: If the date	inserted in this block does not meet the applicable	statutory filing requirements, t	this date will not be listed as
the document's c	ffective date on the Department of State's records.		
Having been nan this certificate, I	ned as registered agent to accept service of process am familiar with and accept the appointment as rej	s for the above stated corporate gistered agent and agree to act	ion at the place designated in in this capacity
روع	a MA		7-20-15
	Required Signature/Registered Agent		Date
I submit this doci documents to the I	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware that the false	e information submitted in a FS
Cem	Mh -	y - 2 gram conserved for the heart of a section	7.20-15
Roquir	ed Signature/Incorporator		Date