

# Amw S3050

Florida Department of State  
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## FLORIDA PROFIT/NON PROFIT CORPORATION ACTIVE CLOUD SOLUTIONS CORP

Certificate of Status	0
Certified Copy	1
Page Count	02
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JUN 21 2017

T. SCOTT

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

**ARTICLE I NAME** ACTIVE CLOUD SOLUTIONS CORP

The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

5797 NW 151 STREET

STE. B

MIAMI LAKES, FL 33014

Mailing address, if different is:

5797 NW 151 STREET

STE. B

MIAMI LAKES, FL 33014

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: CLOUD COMPUTING SERVICES

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000 at \$1.00 PAR VALUE

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: VERONICA G. GUEVARA / VP

Address: 5797 NW 151 STREET

STE. B

MIAMI LAKES, FL 33014

Name and Title: MARCO R. SALAZAR / T

Address: 5797 NW 151 STREET

STE. B

MIAMI LAKES, FL 33014

Name and Title: XAVIER P. GUEVARA / P

Address: 5797 NW 151 STREET

STE. B

MIAMI LAKES, FL 33014

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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**ARTICLE VI REGISTERED AGENT**

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

Name: CABANAS & ASSOCIATES PA  
Address: 10520 NW 26TH STREET STE. C-201  
DORAL, FL 33172

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: CABANAS & ASSOCIATES PA  
Address: 10520 NW 26TH STREET STE. C-201  
DORAL, FL 33172

**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*

 6/15/17  
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.*

 6/15/17  
Required Signature/Incorporator Date