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

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FLORIDA PROFIT/NON PROFIT CORPORATION Sims Real Estate Investments, Inc

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

2018 SEP -6 PM 4:26

18 SEP -6 PM 2:26

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9/7/18

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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: Sims Real Estate Investments, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

45 NW 93rd Street

Miami Shores, FL 33150

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Rental Real Estate Investments

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: John Curry, President

Name and Title: _____

Address: 45 NW 93rd Street

Address: _____

Miami Shores, FL 33150

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

19 SEP - 6 PM 2:25

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: John Curry
 Address: 45 NW 93rd Street
 Miami Shores, FL 33150

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: John Curry
 Address: 45 NW 93rd Street
 Miami Shores, FL 33150

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

 Required Signature/Registered Agent 9-5-18
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.

 Required Signature/Incorporator 9-5-18
Date