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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer: d called to verify np. + Sheet Adhere.			
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COVER LETTER

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

SUBJECT:	First Choice Capital Inc.				
	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed is an original a	nd one (1) copy of the Articl	es of Incorporation and a	check for:		
☐\$70.00 Filing Fee	₹78.75 Filing Fee & Certificate of	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy		
	Status		& Certificate		
		ADDITIONAL COI	Y REQUIRED		
	•				
EDOM.	Miguel Marinez				
FROM:	: Miguel Marinez Name (Printed or typed)				
	20533 Biscayne Blvd #305				
	Address				
	Aventura, FI 33180				
	City, State & Zip				
	786-352-2252				
	Daytime Telephone number				
1					
_	miguelapl1@gmail.com				
E	E-mail address: (to be used for fut	ure annual report notification	1)		

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

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

First Choice Capital, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

- 20533 Biscayne Blvd #305 Aventura, FI 33180

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Business Consultation & Technical Assistance

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Vote

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Adin Rivera - 20533 Biscayne Blvd #305 Aventura, Fl 33180 - President Miguel Marinez - 6700 NW 186th St #211 Miami Lakes, Fl 33015 - Vice President Nieves Furcoy - 7212 Fairway Drive #l-1 Miami Lakes, Fl 33014 - Secretary

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Adin Rivera - 20533 Biscayne Blvd #305 Aventura, Fl 33180

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Miguel Marinez - 6700 NW 186th St #211 Miami Lakes, FI 33015

Having been named as registered agent to accept service of process for the above stated corporation at the place of	
in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capa	city.

Signature/Registered Agent Date

| Date | Discontinuo | Date | Da

10 MAY 21 PH 12:SECRETARY OF STA