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

SUBJECT: 77/2		COM/1010 CD	<u>, LNCELIDA 18</u>	
	(Froposed corpor	ate name - must include su	00003168 -03/14/000 *****87.50	477 5 1049001 *****87.50
Enclosed is an origina	al and one(1) copy of the articles	s of incorporation and a	check for:	
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Joseph B. S. Name (Pri	inted or typed)	A SA	00 MAR
	minni FL	3 30 5 6	J. S. FLOW	RILED 35

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

(305) 625-5087 Daytime Telephone number

C.C.

AŘTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

Ine name of the corporation shall be: Historical Preservation Company	
Inc. The reservation Company	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation shall be:	
P. O Box 69-3591 miami, FL 33269	
Mrami, the 33269	
ARTICLE III SHARES	
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:	
Two thousand Shares of stock shall be authorized	
To a control of section 1768	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS	
The name and Florida street address of the initial registered agent are:	
J. Baron Silas 18015 NW 25th Ct	
Opa Locka, FL 33056	
ARTICLE V INCORPORATOR	
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are:	-
18015 NW 25thCt	
() 18015 NW, 25th Ct	
(Oparocke 1/2 2000	
T. Baron Delas. 3-6-20	
Signature/Incorporator Date	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent,

Signature/Registered Agent