PHOOD HISC

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

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SUBJECT:	Organi V Vo (PROPOSED CORPORATE	T NO.	DE SUFFIX)
	nal and one(1) copy of the articles	of incorporation and a	check for :
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status
FROM: Havgarette Silveica Name (Printed or typed)			
2508 SW 19 Terrace Address			
	Miami, El	33145 State & Zip	THE SERVICE OF THE PROPERTY OF
	C305) 854 Daytime To	elephone number	——————————————————————————————————————

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





Articles 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.

Article I Name

The name of the corporation shall be:

Organikka Incorporated

Article II Principal Office

The principal place of business and mailing address of this corporation shall be:

3300 Biscayne Boulevard, #F-1 Miami, FL 33137

Article III Shares

The number of shares of stock that this corporation is authorized to have outstanding at any one time are:

1,000,000 shares

Article IV Street Addresses of Directors

Margarette Maví Silveira 2508 S.W. 19th Terrace Miami, FL 33145 Maribel Ramirez 3300 Biscayne Boulevard, F-I Miami, FL 33137

Article V Initial Registered Agent and Street Address

The name and Florida Street Address of the initial registered agent are:

Margarette Maví Silveira 2508 S.W. 19th Terrace Miami, FL 33145

Article VI Incorporator

Signature/Incorporator

Signature/Registered Agent

The name of the Incorporator is:

Margarette Maví Silveira

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, an I am familiar with and accept the obligations of my position as registered agent