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## Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : I20000000257 Phone : (850)224-8870 Fax Number : (850)222-1222 SECRETARY OF STATE
TALLAHASSEE, FLORID.

02 JIII 10 PH 3: 29

# FLORIDA PROFIT CORPORATION OR P.A.

CLOUD IX CREATIONS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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### ARTICLES OF INCORPORATION

**OF** 

# CLOUD IX CREATIONS, INC.

SECRETARY OF STATE ALLAHASSEE, FLORIDA 02 JUL 10 PN 3: 29

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 is CLOUD IX CREATIONS, INC.

#### ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 1250 s.W. 85 Avenue, Pembroke Pines, FL 33025.

#### ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one-hundred (100) shares having a par value of (1.00) per share.

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# ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Anjanette Maloney, 1250 S.W. 85 Avenue, Pembroke Pines, FL 33025.

#### ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

# ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of each member of the initial Board of Directors of the corporation is Anjanette Maloney, Colin Maloney, 1250 S.W. 85 Avenue, Pembroke Pines, FL 33025.

The undersigned has executed these Articles of Incorporation this 10th day of July 2002.

"Capital Connection, Inc. by Leilani White, Client Representative"

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# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, subsite the Following statement in designating the registered office/registered agent, in the state of Florida.

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HAVE BEEN NAMED AS RECISTERED 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 AN FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Almalany

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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