PO2000101726

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

DOODD7847510--0 -09/19/02--01045--007 *****87.50 *****87.50

SUBJECT: B	PROPOSED CORPORAT	-	٠	
	(PROPOSED CORPORAT	FE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX)</u>	
Enclosed are an orig	final and one (1) copy of the arti-	cles of incorporation and	d 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:	MICHELLE WATSON Name	(Printed or typed)		•
	21460 SW 90	Address	AEC	02 :
	Miami, FL 3	3 3 1 8 9 State & Zip	All Associated and the second associated aso	SEP 19

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

Daytime Telephone number

284-2870

BM 9/20

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:

BLACKREIGN, INC.,

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

21460 SW 90 CT Miami, FL 33189

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate & Coin laundries

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

OZ SEP 19 MH 8: 44
SEPANZISS ELF STATEA

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

MICHELLE WATSON
21460 SW 90CT
MIGMI, FL 33189

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

MICHELLE WATSON 21460 SW 90CT MIAMI, FL 33189

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

Signature/Registered Agent

Signature/Incorporator

16 Sep 02

Date

16 Sep 02

Date