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TALLAHASSEE FLORIDA

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

SUBJECT: ABC	AA CORPORATION		
	(PROPOSED CORPORA	TE NAME = <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles 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  PPY REQUIRED
FROM: A	BCAA CORPORATION		
	Name	(Printed or typed)	
	25 NW 127 AVE	Address	****
	MIAMI, FL 33182	, State & Zip	
	305-223-3151		
	Daytime	Felephone number	

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

# 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: ABCAA CORPORATION

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TALLAHASSEE FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 25 NW 127 AVE MIAMI, FL 33182-1111

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is: INVESTMENT GROUP

#### ARTICLE IV SHARES

The number of shares of stock is:

1000

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
ALEJANDRO JUAN JANE
BELINDA GOTIDOC JANE

### ARTICLE VI REGISTERED AGENT

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

ALEJANDRO JUAN JANE 25 NW 127 AVE MIAMI, FL 33182-1111

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALEJANDRO JUAN JANE 25 NW 127 AVE MIAMIM, FL 33182-1111

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

in T. Jane

Signature/Incorporator

Date.

<u> 20-15</u>

Date