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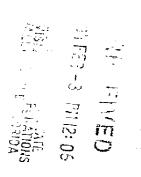
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PICK-UP	☐ WAIT ☐ MAIL
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TALLAHASSES, FLORIDA



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LAZARUS CORPORATE FII	LING SERVICE	
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MIAMI, FLORIDA (305)552-5973		
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CORPORATION NAME(S) &		
1. GEMINISD	ANCER M	ODEL SCORT CORP
(Corporation Name)		(Document #)
2. (Corporation Name)		(Document #)
3. (Corporation Name)		(Document #)
4.		Innermant #1
(Corporation Name)	<b>G</b>	(Document #)
Walk in Pick up time	2.00	Certified Copy
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APPRICATE THE SELECT	AMENDME	ATT CONTRACTOR OF THE CONTRACT
NEW FILINGS	Amendment	310
NonProfit	<u> </u>	A., Officer/Director
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	Trademark	
	Other	
*		Examiner's Initials

# ARTICLES OF INCORPORATION

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

# ARTICLE I - NAME

The name of the corporation shall be:

GEMINIS DANCER, MODEL, SCORT CORP.



# ARTICLE II - PRINCIPAL OFFICE

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

600 NW 109 AYE UNIT #5 MIANI FL 3317Z

# ARTICLE III -SHARES

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

100

### ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Claudio Piloto 600 NW 109 AYE UNIT HS MIAMI FL 33172

# **ARTICLE V - INCORPORATOR**

The name and street address of the incorporator to these Articles of

incorporation is.	CHAUDIO	PILOTO	MAMI			<sup>≯</sup> #!√
The undersigned incorporation this	ncorporator ha _2_ day of X <i>1</i> h	_F&b	hese Articles o			÷
	ARTICLE	VI- DIRECTO	<u> </u>			
The name(s) and lincorporation is (a		ies) of the div		se Articles	of	
	600 NW	109 AVE	172 S		04 FEB -3 AM 8: 53	SECRETARY OF STATE TALLAHASSEE, FLORID
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### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

X 1/1/2
Registered Agent Signature