

# Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : PROFESSIONAL VISA, INC.

Account Number : 120020000173 Phone : (305)639-4737

Fax Number : (305)639-4725

## FLORIDA PROFIT/NON PROFIT CORPORATION

Storm Salvation, Corp.

Certificate of Status	0
Certified Copy	1
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# ARTICLES OF INCORPORATION SECRETARY OF STATE TALLAHASSEE FLORIDA

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

#### ARTICLE I NAME

The name of the corporation shall be:

Storm Salvation, Corp.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address is:

7220 NW 72 Ave. Suite 315 Miami, FL 33166

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any or all lawful activities or business permitted under the laws of The United States, the State of Florida, or any others states, country, territory, or nation.

#### ARTICLE IV SHARES

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is one thousand shares at one-dollar par value.

#### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

President:

Sergio Saladrigas

7220 NW 72 Ave. Suite 315

Miami, FL 33166

### ARTICLE VI REGISTERED AGENT

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

Sergio Saladrigas 7220 NW 72 Ave. Suite 315 Miami, FL 33166 FROM : \_\_(305)\_639\_4725\_\_\_

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SECRETARY OF STATE TALL AHASSEE FLORIDA

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sergio Saladrigas 7220 NW 72 Ave. Suite 315 Miami, FL 33166

\*\*\*\*\*\*\*\*\*\*\*\*\*

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

Date

Signature/Registered Agent

Date