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| (Requestor's Name) | | | | | | | |
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| PICK-UP WAIT MAIL | | | | | | | |
| (Business Entity Name) | | | | | | | |
| (Document Number) | | | | | | | |
| Certified Copies Certificates of Status | | | | | | | |
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LAZARUS CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552-5973

Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Certified Copy Pick up time Photocopy Mail out Will wait Certificate of Status **NEW FILINGS AMENDMENTS Profit** Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION . Foreign Annual Report ☐ Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

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SECRETARY OF STATE FAT LIHASSEF FLORIDA

ARTICLES OF INCORPORATION

<u>of</u>

Marlon Broeren, Inc.

The undersigned, acting as incorporator of a corporation to be formed under the provisions of the laws of the State of Florida, hereby adopts the following Articles of Incorporation for such corporation, to be filed with the Secretary of State of the State of Florida:

ARTICLE ONE

| The | name | of | the | corporation | shall | be | | | |
|-----|------|------|-------|-------------|-------|----|--|--|--|
| | | Marl | lon E | | | | | | |

ARTICLE TWO

The corporation shall have perpetual existence, unless sooner terminated according to law. The corporate existence shall commence immediately.

ARTICLE THREE

| The | general | purposes | for | which | the | corporation | is | organized | are: |
|-----|---------|----------|-----|-------|-----|-------------|----|-----------|------|
| | | | | | | | | | |

- (a) To engage in the <u>business of modeling</u>
- (b) To engage in any lawful activity, trade or business permitted under the laws of the United States of America and of the State of Florida.

ARTICLE FOUR

The aggregate number of shares of capital stock that the corporation shall have the authority to issue is _______ shares of Common Stock with a par value of ______ \$1.00 ______ per share.

The shares of the corporation are not to be divided into classes nor is the corporation authorized to issue shares in series.

ARTICLE FIVE

The name and street address of the initial Registered Agent and registered office of the corporation are as follows:

Marlon Broeren 9572 SW 57 St Miami, FL 33173

The corporation shall have the privilege of opening branch offices at any other place within or without the State of Florida and the Board of Directors may, from time to time, move the principal office to another address in Florida, pursuant to the procedures prescribed by law.

ARTICLE SIX

The initial Board of Directors of the corporation shall consist of one (1) member who shall serve until his successors are elected and qualified at the First Annual Meeting of Stockholders. The name and address of the initial Board of Directors is as follows:

Marlon Broeren 9572 SW 57 St. Miami, FL 33173

A Board of Directors consisting of not less than one (1) nor more than seven (7) members shall be elected at the First Annual Meeting of Stockholders and at each annual meeting thereafter. Unless otherwise provided by law, the entire voting power to elect Directors and for all other purposes shall be vested exclusively in the holders of the outstanding shares of common stock with voting rights of the corporation.

ARTICLE SEVEN

The following named individuals shall be the Officers of the corporation for the first year of its existence, or until their successors are elected by the Board of Directors:

Marlon Broeren

ARTICLE EIGHT

The corporation shall have all the powers enumerated for a corporation under the laws of the State of Florida

ARTICLE NINE

The corporation shall indemnify and hold harmless any and all of its Directors and Officers to the full extent permitted by law.

ARTICLE TEN

The name and address of the incorporator is as follows:

Marlon Broeren 9572 SW 57 St Miami, FL 33173 The principal office's address is as follows:

9572 SW 57 St Miami, FL 33173

ARTICLE ELEVEN

The corporation specifically reserves the right to amend, alter or repeal any or all provisions contained in these Articles in the manner now or hereafter prescribed by law.

| IN WITNESS WHEREOF the undersigned has made and subscribed these |
|---|
| Articles of Incorporation at Miami, Dade County, Florida, this day |
| of, 199, and does hereby certify that the facts and |
| matters hereinabove set forth are true and correct to the best of |
| his/her knowledge and belief. |
| STATE OF FLORIDA] Marlon Broeren] ss: |
| COUNTY OF DADE] |
| I HEREBY CERTIFY that on this day before me an officers duly authorized to administer oaths and take acknowledgements personally appeared to me known to be the person described herein and who executed the foregoing Articles of Incorporation who acknowledged before me that he/she executed the same and that an oath was taken. |
| IN WITNESS WHEREOF, I have set my hand and official seal at Miami, State and County aforesaid, this day of 199 |
| NOTARY PUBLIC, State of Florida at Large |
| (Print Name of Notary) |

My Commission Expires:

06 MAR -9 PM 2:11
SECRETARY OF STATE
TALL AHASSEF FLORIDA

ACCEPTANCE OF DESIGNATION OF REGISTERED AGENT

| Having been named Registered Agent to accept service of prod | ess |
|--|--------------------|
| for Marlon Broeren, Inc. at | the |
| place designated in the Articles of Incorporation herein-above | set |
| forth, I hereby agree to act in said capacity; and further agree | to |
| comply with the provisions of all statutes relative to the proper | and |
| complete performance of the duties of a Registered Agent. | |
| Marion Broeren | |
| STATE OF FLORIDA] ##: COUNTY OF DADE] | |
| I HEREBY CERTIFY that on this day before me, an officer of authorized to administer oaths and take acknowledgements personal appeared to me known to be the person description and who executed the foregoing instrument, who acknowledgement to me that he/she executed the same and that an oath was taken | lly bed iged |
| IN WITNESS WHEREOF, I have set my hand and official seal Miami, State and County aforesaid, this day of | at |
| NOTARY PUBLIC, State of Florida at Large | |
| (Print Name of Notary) | |

My Commission Expires: