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| Certified Copies Certificates of Status | |
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| Special Instructions to Filing Officer: | |
| Special instructions to Filing Officer. | |
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Office Use Only



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SECRETARY OF SIALL SECRETARY OF CORPORATIONS

COVER LETTER

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

| _{SUBJECT:} Guseynov and Sons, | Inc. | | | |
|---|---|------|--|--|
| (PROPOSED C | ORPORATE NAME - MUST INCLUDE SUFFIX) of the articles of incorporation and a check for: | | | |
| \$70.00 \$78.75 Filing Fee Filing Fee & Certificate of St | \$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Co & Certificate Status ADDITIONAL COPY REQUIRE | e of | | |
| FROM: Karina Guseynov | | | | |
| · · · · · · | Name (Printed or typed) | | | |
| 40 Blue Jay Circle | | | | |
| | Address | | | |
| Stoughton, MA 02 | O72 City, State & Zip | | | |
| (781) 344-6886 | Daytime Telephone number | | | |
| | Davinne relevitore 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:

Guseynov and Sons, Inc.



06 JUN 27 PH 4: 18

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

16701 Collins Avenue, Unit 2007E Sunny Isles, FI 33160

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Management Services

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):

Karina Guseynov- President

Karina Guseynov- Treasurer

Karina Guseynov- Clerk

Karina Guseynov- Director

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is:

Karina Guseynov

16701 Collins Avenue, Unit 2007E

Sunny Isles, FL 33160

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Guseynov and Sons, Inc. KARINA GUSEYNOV

16701 Collins Avenue, Unit 2007E

Sunny Isles, FL 33160

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

| S. Cumpion | 6/slob |
|----------------------------|---------|
| Signature/Registered Agent | Date |
| B. Cempion | 6/15/06 |
| Signature/Incorporator | Date |