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COVER LETTER

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

SUBJECT: FORTU	NE ADVISORS CORP. (PROPOSED CORPORA)	FE NAME – <u>MUST INCLU</u>	DE SUFFIX)	_	
Enclosed are an original	inal and one (1) copy of the artic	les of incorporation and a	a check for:		
\$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COI	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM: ARTURO A. AVILES					
Name (Printed or typed)				2000 APR -8	E227
6474 SW 129 AVENUE			ASS	70 70 70 70	il .
Address MIAMI, FL 33183 City, State & Zip			FE FLORIDA	8 AN 11:24	
	(305) 310-7612 Daytime To	elephone 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)

NAME ARTICLE I

The name of the corporation shall be:

FORTUNE ADVISORS, CORP.

ARTICLE II PRINCIPAL OFFICE

The principle street address and mailing address, if different is:

6474 SW 129 AVENUE MIAMI, FL 33183

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: FOR PROFIT

ARTICLE IV SHARES

The number of shares of stock is: 1000

INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

ARTURO A. AVILES - PRESIDENT

ARTICLE VI REGISTERED AGENT

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

ARTURO A. AVILES 6474 SW 129 AVENUE MIAMI, FL 33183

INCORPORATOR ARTICLE VII

The <u>name and address</u> of the Incorporator is: ARTURO A. AVILES

tare/Incorporator

6474 SW 129 AVENUE MIAMI, FL 33183

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 **APRIL 4, 2008** Signature/Registered Agent Date **APRIL 4, 2008**

Date