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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

RECEIVED
08 NOV 19 AM 8:00
DIVISION OF CORPORATIONS

FLORIDA PROFIT/NON PROFIT CORPORATION

BLUELINK INSURANCE CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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TALLAHASSEE, FLORIDA

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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:

BLUELINK INSURANCE CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2761 VILLAGE BLVD #302

WEST PALM BEACH, FL 33409

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

NICOLAS DUQUE (P) (S)

2761 VILLAGE BLVD #302

WEST PALM BEACH, FL 33409

MARIA LUCIA DUQUE (VP)

2761 VILLAGE BLVD #302

WEST PALM BEACH, FL 33409

ARTICLE VI REGISTERED AGENT

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

Alfa Group Company

100 East Linton Blvd

Delray Beach, FL 33483

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Alfa Group Company

100 East Linton Blvd

Delray Beach, FL 33483

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

C-11/15/08

Signature/Registered Agent

11/15/08

Date

C-11/15/08

Signature/Incorporator

11/15/08

Date

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