

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.  
Account Number : I200000000257  
Phone : (850) 224-8870  
Fax Number : (850) 222-1222

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DEPARTMENT OF STATE  
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FLORIDA PROFIT/NON PROFIT CORPORATION

SKY AZUL, INC.

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$87.50

APPROVED  
AND  
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09 JUN 11 AM 9:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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JUN. 11. 2009 1:46PM CAPITAL CONNECTION

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NO. 9701

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:

SKY AZUL, INC.

**ARTICLE II PRINCIPAL OFFICE**

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

1111 Lincoln Road, # 400  
Miami Beach, FL 33139

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Real Estate Investment

**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):

Eugene J. Howard, Esquire, President  
1111 Lincoln Road, Suite # 400  
Miami Beach, FL 33139

**ARTICLE VI REGISTERED AGENT**

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

Eugene J. Howard, Esquire  
1111 Lincoln Road, # 400  
Miami Beach, FL 33139

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Eugene J. Howard, Esquire  
1111 Lincoln Road, # 400  
Miami Beach, FL 33139

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

  
\_\_\_\_\_  
Signature/Registered Agent

  
\_\_\_\_\_  
Signature/Incorporator

6-10-09  
Date

6-10-09  
Date