

Division of Corporations **Electronic Filing Cover Sheet** 

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## FLORIDA PROFIT/NON PROFIT CORPORATION KUBA K-LIBRE RECORDS, INC.

Certificate of Status Certified Copy 1 Page Count

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SECRETARY OF STATE TALLAHASSEE FLORIDA

Florida Department of State

Attention: New Filings Section

To whom it may concern:

This is to advise you that the owners of KUDA K-Libre RECORDS, INC. of Doc# P0900013550 are the same owners of the attached articles of incorporation. We have dissolved the company and have no intention of reopening it. Thank you for your help in this matter.

Very sincerely,

Dayron Morales

THE STREET STREET

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SECRETARY OF STATE TALLAHASSEE FLORIDA

# H10000230786 ARTICLES OF INCORPORATION

THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPT(S) THE FOLLOWING ARTICLES OF INCORPORATION.

#### ARTICLE I - NAME

THE NAME OF THE CORPORATION SHALL BE:

Kuba K-Libre RECORds, INC.

#### ARTICLE II - PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING OF THIS CORPORATION SHALL BE:

571 W 45 PL HiAleah FL 33012

## ARTICLE III - SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

100

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS

Dayron Morales. 571 W 45 PL Hialeah FL 33012

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#### ARTICLE V - INCORPORATOR

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES

21

OF INCORPORATION THIS DAY OF OCTOBER 2010

SIGNATURE

#### ARTICLE VI - DIRECTOR(S)

THE NAME(S) AND STREET ADDRESS (ES) OF THE DIRECTOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

DAYRON MORALES

Zunny Hernandez

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED

OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY, I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATED TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

REGISTERED AGENT SIGNATURE

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