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(Business Entity Name)				
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COVER LETTER

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

SUBJECT: DOUTH TORING REKING CONSULTING GROUP, JUC.					
SUBJECT: PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:					
\$70.00 \$78.75 Filing Fee & Certificate of Status \$78.75 \$87.50 Filing Fee & Certified Copy & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED					
FROM: SOUTH FLORIDA PARKING CONSULTING GROUP, INC. Name (Printed or typed)					
910 SW 28th AVENUE					
Address					
FORT LAUDERDALE, FL 33312 City, State & Zip					
954-393-5345 Daytime Telephone number					
Iuxuryparking09@gmail.com E-mail address: (to be used for future annual report notification)					
NOTE: Please provide the original and one copy of the articles ω					

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I The name of the co	NAME SOUTH FLORIDA PA	RKING CONSULTING GROUP, INC.	
	PRINCIPAL OFFICE Principal street address 910 SW 28th AVENUE FORT LAUDERDALE, FL 33312	Mailing address, if different is:	
ARTICLE III The purpose for w RESERVATI UNITED STA	ohich the corporation is organized is: ON CENTER FOR PARKING FOR	AIRPORTS AND CRUISE LINES, IN	THE
	SHARES res of stock is: ONE THOUSAND SHAF INITIAL OFFICERS AND/OR DIRECT		
Name and T Address:	itle:JESUS APONTE, PRESIDENT 910 SW 28th AVENUE FORT LAUDERDALE, FL 33312	Name and Title: FERNANDO APONTE Address: 910 SW 28th AVENUE FORT LAUDERDALE,	
Name and T Address:	itle: JOSE SANTIAGO, VICE PRESIDE 910 SW 28th AVENUE FORT LAUDERDALE, FL 33312	Name and Title:Address:	
Name and T Address:	itle: JULIO LARA, SECRETARY 910 SW 28th AVENUE FORT LAUDERDALE, FL 33312	Name and Title:Address:	
	REGISTERED AGENT prida street address (P.O. Box NOT acceptable LAW OFFICES OF DEBRA P.R 900 SOUTH ANDREWS AVEN	OCHLIN, P.A.	20
ARTICLE VII The name and add Name: Address:	FORT LAUDERDALE, FL.3331 INCORPORATOR Iress of the Incorporator is: DEBRA P. ROCHLIN, PA 900 SOUTH ANDREWS AVENU	CRETARY O	APR -8
		ess for the above stated corporation at the place of egistered agent and agree to act in this capacity APRIL 4, 20	ယ designated in
I submit this docu	Required Signature/Registered Agent ment and affirm that the facts stated herein epartment of State constitutes a third degree fe	Date re true. I am aware that the false information si	
de de	Required Signature/Incorporator	APRIL 4, 2	