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Florida Department of State
Division of Corporations
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To: Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
BLUE OCEAN BILLING CORP.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED
12 MAR 22 AM 7:30
DIVISION OF CORPORATIONS

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2012 MAR 22 AM 10:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
J. Shivers MAR 23 2012

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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:

Blue Ocean Billing Corp.

ARTICLE II - PRINCIPAL OFFICE

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

10470 West Okeechobee Rd #907
Hialeah Gardens FL 33018

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

LiusBIT Portal
10470 West Okeechobee Rd #907
Hialeah Gardens FL 33018

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ARTICLE V - INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

LIUSBIT PORTAL
 10470 WEST OKEECHOBEE RD # 907
 HIALEAH GARDENS FL 33018

The undersigned incorporator has executed these Articles of Incorporation this

21st day of March 2012.

X 
 Signature

ARTICLE VI - DIRECTOR(S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

LIUSBIT PORTAL (P)
 10470 WEST OKEECHOBEE RD # 907
 HIALEAH GARDENS FL 33018

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

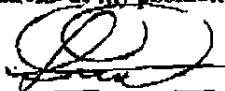
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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT
REGISTERED OFFICE

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.

X 
 Registered Agent Signature

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