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COVER LETTER

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

SUBJECT: Focus Advisors Corp.		
(PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	d a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
	ADDITIONAL CO	DPY REQUIRED
FROM: Amir Arazi	(Printed or typed)	
2565 NE 206th Lane	Address	
Miami, FL 33180	State & Zip	
305-510-8772	elephone number	
amir.arazi@gmail.com E-mail address: (to be used	•	notification)

NOTE: Please provide the original and one copy of the articles.

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

The name of the corporation shall be: 12 APR 19 AH 11: 4. ARTICLE II PRINCIPAL OFFICE Principal street address 2565 NE 206th Lane Miami, FL 33180 ARTICLE IV PURPOSE The purpose for which the corporation is organized is: Financial Consulting and Wealth Management ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title-Amir Arazi Address: 2565 NE 206th Lane Miami, FL 33180 Name and Title: Address: A	ADTICIEI	NAME -	DIAISION OF COMPERMENTAL
Principal street address Principal street address 2565 NE 206th Lane Miami, FL 33180 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Financial Consulting and Wealth Management ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS The number of shares of stock is fl 00 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address: Amin EL 33180 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Amin EL 33180 ARTICLE VI INCORPORATOR The name and address of the Incorporator is: Name: Amin EL 33180 ARTICLE VI INCORPORATOR The name and address of the Incorporator is: Name: Amin Tara: Address: 2565 NE 206th Lane Miami, FL 33180 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 Od/10/2012 Required Signature Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of Slate constitutes a third degree felony as provided for in s.817.155, F.S. Od/10/2012			12 ADD 19 AMII: 47
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