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COVER LETTER

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

SUBJECT: CP MANAGERS, INC							
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)						
Enclosed are an original and one (1) copy of the arti-	cles of incorporation and a check for:						
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status						
	ADDITIONAL COPY REQUIRED						
FROM: HEIDI PEREZ Name	(Printed or typed)						
255 UNIVERSITY DRIVE							
Address							
CORAL GABLES, FL 33 City,	3134 State & Zip						
305-665-1250 Daytime To	elephone number						
HPEREZ@ACGGDEVEL	OPMENT.COM						

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

ARTICLES OF INCORPORATION

FILED
2 JUN 11 PM 2:35

OF

CP MANAGERS, INC.

I, the undersigned incorporator, hereby make, acknowledge and file these Articles of Incorporation for the purpose of forming a corporation under the laws of the State of Florida.

ARTICLE I NAME

The name of this corporation shall be:

CP MANAGERS, INC.

Its principal place of business and/or mailing address shall be:

255 UNIVERSITY DRIVE CORAL GABLES, FL 33134

ARTICLE II NATURE OF BUSINESS

The general purpose for which this Corporation is organized is to transact any or all lawful business for which corporations may be incorporated under Chapter 607, Florida Statutes.

ARTICLE III AUTHORIZED SHARES

The Corporation shall be authorized to create and issue 100 shares of Common Stock having a par value of \$0.01 per share.

The whole or any part of the authorized shares of the Corporation may be issued for a consideration payable in cash or other property, tangible or intangible, or in labor or services actually performed for the Corporation, having a value as is determined from time to time by the Board of Directors of the Corporation, not less than the par value of the stock so to be issued.

be:

ARTICLE IV TERMS OF EXISTENCE

The term of this Corporation shall commence with the filing of these Articles of Incorporation. The Corporation shall exist perpetually unless dissolved according to law.

ARTICLE V INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Corporation in the State of Florida shall be:

255 UNIVERSITY DRIVE CORAL GABLES, FL 33134

The name of the initial registered agent of this Corporation at that address shall

ARAN CORREA GUARCH & SHAPIRO, P.A. c/o DANNY CORREA, ESQ.

ARTICLE VI BOARD OF DIRECTORS

The powers of the Corporation shall be exercised by or under the authority of, and the business and affairs of the Corporation shall be managed under the direction of, a Board of Directors, which shall have One (1) director initially. The number of directors may be increased or decreased by the shareholders from time to time as provided in the Bylaws of the Corporation.

ARTICLE VII DIRECTORS - NAMES AND STREET ADDRESSES

The names and street addresses of the members of the first Board of Directors who shall hold office until their successors have been duly elected or appointed and have qualified are as follows:

DANNY CORREA, ESQ. 255 UNIVERSITY DR. CORAL GABLES, FL 33134

ARTICLE VIII INCORPORATOR

The name and street address of the incorporator signing these Articles of Incorporation is as follows:

DANNY CORREA, ESQ. 255 UNIVERSITY DR. CORAL GABLES, FL 33134

STA	ATE OF	FLOI)					
CO	UNTY (,)					
	THE	E FOF	REGOIN	IG insti	rument was a	cknowle	edged before	me this	s <u>5</u> day
of_	June		, 201	2, by _	Danny	Cor	<u>(ea</u> , w <u>h</u>	o is pe	ersonally known
to	me	or	who	has	produced	the	following	as	identification:
				and who did/did not take an oath.					
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Not	ary Publ	lic, St	ate of F	orida					



DESIGNATION AND ACCEPTANCE

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SECRETARY OF STATE
FALL MASSES FOR

OF

REGISTERED AGENT

In pursuance of Section 48.091 and Chapter 607, Florida Statutes, <u>CP MANAGERS, INC</u>. having filed its Articles of Incorporation contemporaneously herewith, with its registered offices as indicated therein at <u>255 University Dr., Coral Gables, Florida 33134</u>, has named <u>Danny Correa</u>, located thereat as its registered agent to accept service of process within this state.

Incorporator

Having been named as registered agent to accept service of process for the abovestated corporation, at the location designated herein, I hereby accept the appointment to act in this capacity, and agree to comply with the laws of Florida applicable thereto.

Registered Agent

C:\WP50\CORP\FORMS\ARTINC