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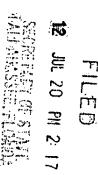
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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COVER LETTER

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

SUBJECT:	URBAN SAVAGE INC.			
Facility of an array	(PROPOSED CORPORA	,		
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL C	OPY REQUIRED	
FROM:	ROM: Michelle Marshall Name (Printed or typed) 117 N.E. 1ST. Ave., suite 704 Address			
Miami Florida 33132 City, State & Zip				
	(954)629-1144 Daytime Telephone number			
monifiquem7@gmail.com E-mail address: (to be used for future annual report notification)			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)

ARTICLE I NAME URBAN SAVAGE INC. The name of the corporation shall be:			
ARTICLE II PRINCIPAL OFFICE	FILED		
Principal street address	Mailing address if different is:		
117 N.E. 1st. Ave. suite 704	JUL 20 PH 2: 17		
	$M_{\rm c}^{\rm c}$, $M_{\rm c}^{\rm c}$, $M_{\rm c}^{\rm c}$		
Miami Fl. 33132	AMIANISM OF STATE		
ARTICLE III PURPOSE	T. T. CANA		
The purpose for which the corporation is organized is:	n		
This corporation will be manufacting, distributing, and selling, jewelry and			
and continued to the body.			
manufacturil as in a			
trinkets.			
7- 7-			
ARTICLE IV SHARES			
The number of shares of stock is:			
ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR	8		
Name and Title: Michelle Marshall			
Address: 117 N.E. 1st. Ave, suite 704	Address: 117 N.E. 1st Ave., suite 704		
Miami FI 33132	Miami Fl_ 33132		
Name and Title:	Name and Title:		
Address:	Address:		

Name and Title:	Name and Title:		
Address:	Address:		
 	<u> </u>		
			
ARTICLE VI REGISTERED AGENT			
The name and Florida street address (P.O. Box NOT acceptable) of	the registered agent is:		
Name: Michelle Marshall	-		
Address: 117 N.E. 1st. Ave.,	-		
Miami Fl 33132	-		
ARTICLE VII INCORPORATOR			
The <u>name and address</u> of the Incorporator is:			
Name: Michelle Marshall	-		
Address: 117 N.E. 1st. Ave.,	-		
Miami Fl 33132	-		
Having been named as registered agent to accept service of process			
this certificate, I am familiar with and accept the appointment as regi	stered agent and agree to act in this capacity		
MManDald	7/11/2017		
	7/16/2012		
Required Signature/Registered Agent	Date		
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 State constitutes a third degree felony as provided for in s.817.155, F.S.			
m			
-11/11/ardal)	7/16/2012 Date		
Required Signature/Incorporator	Date Date		