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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 : (305)634-3694 Phone : (305)633~9696 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

- · · · ·	Address:		
Kmall	ADDEMSS:		

FLORIDA PROFIT/NON PROFIT CORPORATION OXY BUMP CORPORATION

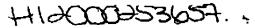
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10/19/2012



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

	Principal elect address Principal elect address 700 Biscavne Blvd.	Molling address, if different is:	
23	ulte 404 liami, FL 33137		
ш	MAININI L. VOINI		<u></u>
RTICLE III	PURPOSE		产品 乙
he purpose for which the corporation is organized is: To manufacture and market consumer products			5º 8 '
o wauntactu	re and market consumer products.		
			ra.
			The state of the s
			7)(1, 1,
ARTICLE IV SHARES The number of shares of stock is: 10,000,000		,	22 :
	•		
RTICLE V	INITIAL OFFICERS AND/OR DIRECTOR	<u>is</u>	Table 1 and Occasi
	ile:Shamila Hunter -	Name and Title: CEO, VP	
Address:	4700 Biscayne Blvd.		,
	Suite 404 Miami FL 33137		
	· · · · ·		
Name and Ti	ile: Lissa Charron	Name and Title: President	
Address:	4700 Biscayne Blvd	_ Addréss;	
	Sulte 404 Miami, FL 33137		
	MIBITIL FL 3313/		
Name and Title:		Name and Title:	
Address:		Address:	
	•		·
RTICLE VI	REGISTERED AGENT		
	rida etreot address (P.O. Box NOT soceptable) o	f the registered agent is:	•
Name:	Alan K. Marcus, Esg.		
Address:	2600 Douglas Road, Suite 1111	-	
	Corel Gables Fl 33134		
D/W/4 12 1171	INCORPORATOR		•
	tress of the Incorporator is:	•	•
Name:	Shamila Hunter	•	
Address:	4700 Biscayne Blvd Suite 404		
	Mlami FL 33137	_	
		_	
aving been noon	ed as registered agent to accept service of process	s for the above stated corporati	on at the place designated in
is conficale, 1 at	n familiar with and accept the appointment as ma	ristered agent and agree to act in	this capacity
	2 /11/		
	A VC VC		10/19/17
	Required Signature Registered Agent		Date
submit this docu	ment and affirm that the facts stated herein are	the famous and the state of the	• 6= 6
current to the De	partment of State couxitates a filed degree felon	· wwo c um urare mat the jats. Day provided for in a kit is to k	z injorm un on stibnilijed in a i s
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