Division of Corporations

Florida Department of State

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Kmail	Address:	Lommylamue	tommylamuenta@yahoo.com	
	•	1		

FLORIDA PROFIT/NON PROFIT CORPORATION

Tommy Fade Master Inc.

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

T. Burch MAR 1 2 2013.

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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:

Tommy Fade Master Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1336 D Military Trail West Palm Beach, FL 33415 13 HAR II PH 4: 06 SECRETARY OF STATE TALLARAS SECTOR FOR

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Tomas Leon Rivera 4629 Georgia Pines Drive West Palm Beach, FL 33415

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940

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ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

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

Tomas Leon Rivera - President/Director 4629 Georgia Pines Drive, West Palm Beach, FL 33415

Gladys Rodriguez - Treasurer/Director 4629 Georgia Pines Drive, West Palm Beach, FL 33415

ARTICLE VI INCORPORATOR(\$)

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

Tomas Leon Rivera 4629 Georgia Pines Drive, West Palm Beach, FL 33415

Gladys Rodriguez 4629 Georgia Pines Drive, West Palm Beach, FL 33415

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

day of March 20 13 Tomas Leon Rivera Signature **Gladys Rodriguez**

7th

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	Tommy Fade Master Inc.	
2. The name and address of the registe	red agent and office is:	FILE SECRETARY TALLARYS
	Tomas Leon Rivera	- FR H
	4629 Georgia Pines Drive (P.O. Box or Mail Drop Box NOT Acceptable)	_ · · · · · · · · · · · · · · · · · · ·
	West Palm Beach, FL 33415 (City / State / 2.ip)	

Having been named as registered agent and to accept service of process for the above stated corporation at the 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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Tornas-Leon Rivera (Date)