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Florida Department of State

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Corporate Filing Menu

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H13000000407

ARTICLES OF INCORPORATION

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

he name of the corpore	INCIPAL OFFICE					
12019 SW 39	Principal street address		Mailing address, if different is: Same as Principal Address			
		Same				
Mlami, Florida	a 33175	·				
RTICLE IN PUR						
•	the corporation is organized is: r business permitted unde	r the laws	of the			
United States	and of the State of Florid	a.				
		· · · · · · · · · · · · · · · · · ·				
			<u> </u>			
			ディー No. 1			
ARTICLE IV SH	4255 500		HASSE HASSE			
ARTICLE IV SH	ABES I stock is: 500		HASSE HASSE			
			HASSE HASSE			
RTICLE V IN	TIAL OFFICERS AND/OR DIRECTO	RS	HASSEE FLORID			
Name and Titl	TIAL OFFICERS AND/OR DIRECTO e, lan Robert Dean, Pres.	_ Name and Title	HASSEE FLORIDA, VP			
RTICLE V IN	nat officers and/or directo a lan Robert Dean, Pres. 12019 SW 39 Terrace	RS Name and Title Address:	Elisa M. Dean, VP			
Name and Titl	TIAL OFFICERS AND/OR DIRECTO e, lan Robert Dean, Pres.	_ Name and Title	HASSEE FLORIDA, VP			
Name and Titi Address	nat orrices and or precto In Robert Dean, Pres. 12019 SW 39 Terrace Miami, Florida 33175	Name and Title Address:	Elisa M. Dean, VP 12019 SW 39 Terrace Miami, Florida 33175			
Name and Titi Address	nat orrices and or precto lan Robert Dean, Pres. 12019 SW 39 Terrace Miami, Florida 33175	Name and Title Address: Name and Title	Elisa M. Dean, VP 12019 SW 39 Terrace Miami, Florida 33175			
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Name and Title Address Name and Title Address	HAL OFFICERS AND OR DIRECTO e. lan Robert Dean, Pres. 12019 SW 39 Terrace Miami, Florida 33175	Name and Title Address: Name and Title Address: Name and Title	Elisa M. Dean, VP 12019 SW 39 Terrace Miami, Florida 33175			

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(cont.)

	Required Signature/Incorporator		Date		
	faria		03-15-13		
I submit this do document to the	cument and afform that the facts statud herein a Department of State constitutes a third degree fel	re true. I am aware that the lony as provided for in s.817.	faiso information submitted in a 155, F.S.		
Required Signature/Registered Agent			Date		
- Jaco			03-15-2013		
Having been nathin certificate, I	need as registered agent to accept service of proc ara familiar with and accept the appointment as	ess for the above stated corporeplatered agent and agree to	pration at the place designated in act in this capacity		
	Miami, Florida 33175		AIE AIDA		
Address:	12019 SW 39 Terrace	_	AM II: 01 OF STATE FLORIDA	`- 	
Name:	lan Robert Dean		SEE 0 A		
ARTICLE VII INCORPORATOR The name and address of the incorporator is:			MAR I	-	
APSTOLIC VIT	INCORPORATOR		3 M		
	Miami, Florida 33175				
Address:	12019 SW 39 Terrace				
Name:	lan Robert Dean	_			
	REGISTERED AGENT Iorida street address (P.O. Box NOT acceptable)	of the registered agent is:			
, ma. a					
		Address:			
Name and Title:		Name and Title:			