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## Florida Department of State

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From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES. SINC Account Number: 075350000353

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## FLORIDA PROFIT/NON PROFIT CORPORATION Decorate Florida Properties Inc

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June 7, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BLUMBERG/EXCELSIOR

SUBJECT: DECORATE FLORIDA PROPERTIES, INC

REF: W13000033209

We have received your document for DECORATE FLORIDA PROPERTIES, INC and your check(s) totaling \$. However, the enclosed document has not been filled and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable.Please refer to the following link for acceptable officer/director titleinformation. http://www.sunbiz.org/titledef.html.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Pamela Smith Regulatory Specialist II FAX Aud. #: H13000127705 Letter Number: 513A00014361

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

	<u>ME</u> ation shall be: Decorate Florida F				
ARTICLE II PR	NCIPAL OFFICE Principal street address	Mailing address, if different is:			
115 West 45	h Street, Suite 606	115 West 45th Street, Suite 606			
New York NY	10036	New York NY 10036			
ARTICLE III PUI The purpose for which	RPOSE the corporation is organized is: To hold	l Real Esta	ite.		
				更 <u>。</u>	
				And the second	
				<u> </u>	
ARTICLE IV SH	ARES 1,000			10 H	
ARTICLE IV SH The number of shares o	ARES f stock is: 1,000			ACHIONA SESSIONAL OF STATEMENT OF SUMMER STATEMENT OF SUMMER SUMM	
	ARES f stock is: 1,000 TIAL OFFICERS AND/OR DIRECTOR	<u></u>		<b>35</b>	
ARTICLE V IN	TIAL OFFICERS AND/OR DIRECTOR	RS Name and Title	Leonor Carvalho de Sa	<b>35</b>	
ARTICLE IV SH The number of shares of ARTICLE V INC Name and Tit Address	TIAL OFFICERS AND/OR DIRECTOR		Leonor Carvalho de Sa Rua Iposeira, 871 Sao	Vice Pres	
ARTICLE V IN	TIAL OFFICERS AND/OR DIRECTOR le: Edson Marcelo de Sa- President	_ Name and Title	**	Vice Pres	
ARTICLE V IN	TIAL OFFICERS AND/OR DIRECTOR le: Edson Marcelo de Sa- President Rua Iposeira, 871 Sao Conrado Rio de Janeiro - RJ 22610-380	_ Name and Title _ Address:	Rua Iposeira, 871 Sao	Vice Presi Conrado 2610-380	
Name and Tit Address	TIAL OFFICERS AND/OR DIRECTOR le: Edson Marcelo de Sa- President Rua Iposeira, 871 Sao Conrado Rio de Janeiro - RJ 22610-380	_ Name and Title _ Address:	Rua Iposeira, 871 Sao Rio de Janeiro - RJ 22	Vice Presi Conrado 2610-380	
Name and Tit  Address  Name and Titl	TIAL OFFICERS AND/OR DIRECTOR le: Edson Marcelo de Sa- President Rua Iposeira, 871 Sao Conrado Rio de Janeiro - RJ 22610-380	Name and Title Address:  Name and Title	Rua Iposeira, 871 Sao Rio de Janeiro - RJ 22	Vice Presi Conrado 2610-380	
Name and Titl Address  Name and Titl Address	TIAL OFFICERS AND/OR DIRECTOR le: Edson Marcelo de Sa- President Rua Iposeira, 871 Sao Conrado Rio de Janeiro - RJ 22610-380	Name and Title Address: Name and Title Address:	Rua Iposeira, 871 Sao Rio de Janeiro - RJ 22	Conrado 2610-380	
Name and Titl Address  Name and Titl Address	TIAL OFFICERS AND/OR DIRECTOR le: Edson Marcelo de Sa- President Rua Iposeira, 871 Sao Conrado Rio de Janeiro - RJ 22610-380	Name and Title Address:  Name and Title Name and Title Address:  Name and Title	Rua Iposeira, 871 Sao Rio de Janeiro - RJ 22	Conrado 2610-380	

			(conti.)
Name a Addres	nd Title:	Name and Title:Address:	
ARTICLE VI The name and I Name: Address:	REGISTERED AGENT Torida street address (P.O. Box NOT acceptable BLUMBERGEXCELSIOR CORPORATE SERVICES, I 155 Office Plaza Drive, 1st Fl. TALLAHASSEE, FL 32301		
ARTICLE VII The name and a	INCORPORATOR  And Maisonave		13 JUN
Address:	16 Court St, 14th FL Brooklyn, NY 11241	<del></del>	AHII: 5
this cardficate.	imed as registered agent to accept service of pro- i am familiar with and accept the appointment as cretary, Jose Mojica	cess for the above stated corporation at the place de registered agent and agree to act in this capacity	≥m ~,
	747	6/6/2013	··
	Required Signature/Registered Agent	Date	
	cument and affirm that the facts stated herein a Department of Sidte constitutes a third degree fo	are true. I am aware that the false information sai clony as provided for in s.817.155, F.S.	mitted in a
12	a Maragarat	6/6/2013	3
	Required Signature/incorporator	Date	