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

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FLORIDA PROFIT/NON PROFIT CORPORATION
AVILA, CORP

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

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(3)

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

ARTICLE I NAME
The name of the corporation shall be: Avila, Corp

ARTICLE II PRINCIPAL OFFICE

Principal street address

1920 S. Ocean Dr
#14D
Hallandale Beach, Fl 33009

Mailing address, if different is:

999 Ponce De Leon Blvd
Suite #625
Coral Gables, Fl 33134

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:

The corporation will engage in activities or business permitted under the laws of the United States and under the law of the State of Florida.

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ARTICLE IV SHARES
The number of shares of stock is: 1,000 ; $ 1.00 Par Value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Andres I. Moreno-Quevedo / DPST
Address: 1920 S. Ocean Dr, #14D, Hallandale Beach, Fl 33009

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

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(cont.)

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

_____ _____

_____ _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Appelrouth Consulting Corp

Address: 999 Ponce de Leon Blvd Suite # 625

Coral Gables, Fl 33134

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Appelrouth Consulting Corp

Address: 999 Ponce de Leon Blvd Suite # 625

Coral Gables, Fl 33134

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

_____ 6/20/2013

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.

_____ 6/20/2013

Required Signature/Incorporator Date