P13000074299

(Requestor's Name)				
(Address)				
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(Cit	y/State/Zip/Phone	:#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only

2544-120000410584



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08/16/13--01012--005 **78.75

13 SEP -9 PM 4: 43

9/11/13

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: F.F. Group Inc (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status			
	ADDITIONAL COPY REQUIRED			
FROM: Cathleen Aller Name (Printed or typed)				
150 Ocean Ln Drive Suite # 6-F				
Miami, Florida 33149 City, State & Zip				
305-310-3796 Daytime Te	lephone number om for future annual report notification)			
rogerfuents@gmail.com E-mail address! (to be used for future annual report notification)				

NOTE: Please provide the original and one copy of the articles.

SECRETARY OF STATE
DIVISION OF CORPORATIONS

FLORIDA DEPARTMENT OF STATE Division of Corporations

August 21, 2013

CATHLEEN ALLER 150 OCEAN LN DRIVE SUITE #6-F MIAMI, FL 33149

SUBJECT: FF GROUP INC Ref. Number: W13000046584

We have received your document for FF GROUP INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of 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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 213A00019979

SECRETARY OF STATE
IVISION OF GORPORATIONS

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

ARTICLE I The name of the corp	NAME poration shall be: FFHGrou	in Inc	FILEÚ SECKETARY OF STATE DIVISION OF CORPORATIONS
ARTICLE II	PRINCIPAL OFFICE		
15	Principal <u>street</u> address 50 Ocean Ln Dr Suite 6-F ami, Florida 33149		g addrel 3 is a ifferent is: PH 4: 43
ARTICLE III P			
	ich the corporation is organized is:	1	
Provi	ide consultin	g and	
Opera ARTICLE IV	ations servic SHARES s of stock is 10,000	es	
Name and Titl Address:	e:Roger Fuentes / President 150 Ocean Ln Dr. Suite 6F Miami, Fl 33149	Name and Title:	
Name and Titl Address:	e:	Name and Title: Address:	
Name and Titl Address:	e:		
ARTICLE VI	REGISTERED AGENT		
The <u>name and Flori</u>	ida street address (P.O. Box NOT acceptable) o	f the registered agent is:	
Name: Address:	Cathleen Aller 150 Ocean Ln Dr Suite 6F Miami FL 33149	- 	
ARTICLE VII	INCORPORATOR		
The name and addr	ess of the Incorporator is:		
Name: Address:	Cathleen Aller 150 Ocean Ln Dr. Suite 6F Miami, FL 33149	 	
	registered agent to accept service of proces familiar with and accept the appointment as reg		
	Required Signature/Registered Agent		8-12-13 Date
I submit this docum document to the Dep	nent and affirm that the facts stated herein are partment of State constitutes a third degree felon	e true. I am aware that to y as provided for in s.817	the false information submitted in a
	<u> </u>		8-12-13
	Required Signature/Incorporator	·	Date