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SECRETARY OF STATE TALLAHASSEE, FLORIC

Ps 9/24/13

COVER LETTER

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

_{SUBJECT:} B FI	LOW RECORDS	SINC	
· · · · · · · · · · · · · · · · · · ·	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	JDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l a check for:
■ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status PPY REQUIRED
_{FROM:} <u></u> Ј (ohn Cunill Esq		
	Nam	e (Printed or typed)	
10	000 Brickell Ave.	Suite 1005	
		Address	
М	iami FL 33131		
	City	, State & Zip	
30	05-381-9999		
	Daytime 1	Celephone number	

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

john@acdfirm.com

E-mail address: (to be used for future annual report notification)

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

ARTICLE I NA	IME B FLOW RECORI	DS INC.	FILED
			13 SEP 20 AH 8: 37
ARTICLE II PR	Principal <u>street</u> address	Mailing	address, EEORien IASKY OF STATE
6770 Indian (Creek Drive		TALLAHASSEE, FLORIDA
Suite 7M			
Miami Beach	i, FL 33141		
ARTICLE III PU. The purpose for which	RPOSE the corporation is organized is: Any an	d all lawful busi	ness.
	_ +		
			-
ARTICLE IV SH The number of shares of	MARES 1000		
	ITIAL OFFICERS AND/OR DIRECTOR		
Name and Tit	Leonard J Lopez (Pres.)	Name and Title:	
Address	6770 Indian Creek Dr	_ Address:	· · · · · · · · · · · · · · · · · · ·
	Suite 7M	-	
	Miami Beach, FL 33141	<u> </u>	
Name and Titl	e:	Name and Title:	•
Address			
Address			
Name and Titl	e:	Name and Title:	
Address		Address:	
		· · · · · · · · · · · · · · · · · · ·	_

FILED

Name ar	d Title:	Name and Title:	13 SEP 20 AM 8: 37
Address	·	Address:	SECRETARY OF STATE TALLAHASSEE, FLORIDA
		_	
RTICLE VI	REGISTERED AGENT		
he <u>name and F</u>	lorida street address (P.O. Box NOT acceptable) of	the registered agent i	s:
Name:	John Cunill Esq		
Address:	1000 Brickell Ave Suite 1005		
	Miami FL 33131		
ARTICLE VII	INCORPORATOR		
he <u>name and a</u>	ddress of the Incorporator is:		
Name:	Leonard J Lopez		
Address:	6770 Indian Creek Dr #7M		
	Miami Beach FL 33141		
	ned as registered agent to accept service of process		
his certificate, I	am familiar with and accept the appointment as reg	istered agent and agi	•
			9-18-2013
	Required Signature/Registered Agent		Date
A	, , ,		
submit this doe locument to the	cument and offirm that the facts stated herein are to Department of State constitutes a third degree felony	true. I am aware tha y as provided for in s.	at the false information submitted in 817.155, F.S.
submit this doc	ument and offirm that the facts stated herein are i	true. I am aware tha y as provided for in s.	the false information submitted in .817.155, F.S. 9-/8-2013