Division of Corporations **Electronic Filing Cover Sheet**

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FLORIDA PROFIT/NON PROFIT CORPORATION

WING LINE FINANCE INC

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\$78.75

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act; Hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: WING LINE FINANCE INC

ARTICLE II PRINCIPAL OFFICE

The principle place of business and mailing address of this corporation shall be:

1952 N.W. 93 AVE DORAL, FL 33172

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

FIVE (500) HUNDRED SHARES ONE DOLLAR (I) PER VALUE COMMON STOCK

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

PAULO CASSEB 1952 N.W. 93 AVE DORAL, FL 33172

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ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

PAULO CASSEB 1950 N.W. 93 AVE DORAL,FL 33172

ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

CARLOS PAES DE ALMEIDA FILHO (PRESIDENT) 1950 N.W. 93 AVE DORAL, FL 33172

Paulo CASSEB (SECRETARY) 1950 N.W. 93 AVE DORAL, FL 33172

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 10 day of JANUARY 2014.

Signature

Signature

Signature

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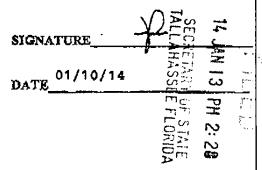
CERTIFICATE OF DESIGNATION RECISTERED AGENT/ REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/ registered agent, in the State of Florida.

- 1. The name of the corporation is: WING LINE FINANCE INC
- 2. The name and address of the registered agent and office is:

PAULO CASSEB	
1950 N.W. 93 AVE	(NAME)
(P.O. BOX - DÖRAL "FL 33172	NOT ACCEPTABLE)
(Cn	TY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.



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