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CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

	(CORPORATE NAME	(DO:	(DOCUMENT#)	
2. (CORPORATE NAME)) (DO	(DOCUMENT #)	
3.				
	(CORPORATE NAME)) (20)	(DOCUMENT =)	
3.000	/Filings	Amendments	Other Fillings	
Profit		Amendments	Annual Report	
Profit Non-P	Profit			
Profit Non-P		Amendments	Annual Report	
Profit Non-P	Profit d Liability	Amendments	Annual Report Fictitious Name	

AFFIDAVIT

BEFORE ME, the undersigned authority, on this day personally appeared, EVELIO MOLINA who after being first duly sworn, under oath, deposes and says:

- 1. The undersigned is the sole Director and the President of RANGER SEAT COVER CORPORATION, a Florida corporation, filed with the Florida Department of State on May 20, 1991, and filing Articles of Dissolution on or about January 14, 2014.
- 2. The undersigned hereby consents JAIRO LOAIZA to and authorizes the use of the name RANGER SEAT COVER CORPORATION
- 3. The undersigned has personal knowledge of the facts and matters set forth herein and therefore has no intentions to Revoke the Dissolved entity.

FURTHER AFFIANT SAYETH NAUGHT.

EVELIO MOLINA

STATE OF FLORIDA

SS:

COUNTY OF MIAMI-DADE

PERSONALLY appeared before me, EVELIO MOLINA who is personally known to me, who being by me first duly sworn, acknowledges that she signed the foregoing for the purposes therein expressed.

WITNESS my hand and seal this 14 day of JANUARY, 2014.

Notary Public - ISRAEL PANDO

SEAL:



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

ARTICLE I The name of the	$\underline{\underline{NAME}}$ corporation shall be: $RANGERS$	EAT COVER, CORI	PORATION
ARTICLE II	PRINCIPAL OFFICE Principal street address 3598 5W 8 D STREET		dress, if different is:
	MIAMI, FL. 33/36		
	which the corporation is organized is:		
A	VY AND ALL LAW?	FUL BUSINESS	
ARTICLE IV The number of sh	· - · · · · · · · · · · · · · · · · · ·		
Name and Address:	INITIAL OFFICERS AND/OR DIRECTION THE STATE OF S	Name and Title: 122 Address:	SISENT/DIRECTOR
Name and Address:		Name and Title:Address:	
Name and 3 Address:	Title:	Name and Title:Address:	
	REGISTERED AGENT lorida street address (P.O. Box NOT accepta	hie) of the registered agent is:	TALL
Name: Address:	3518 3W 8th 57 MAN! FL 33136		JAH 16
The name and ac	INCORPORATOR Idress of the Incorporator is:		
Name: Address:	JA 120 LOA12 A 2598 SW 84 372 MIAMI, FL 23/3	5	
Having been not this certificate, I/	ned as registered agent to accept service of p am familiar with and accept the appointment	as registered agent and agree to a	ct in this capacity
- Jaing	Required Signature/Registered Ager	nt .	01/15/14 Date
	ument and affirm that the facts stated herei Department of State constitutes a third degree	n are true. I am aware that the fo	
Jaur .	Required Signature/Incorporator		0/15/14 Date
/			,