

JAN/17/2014/FRI 01:01 PM

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Division of Corporations

Florida Department of State  
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FLORIDA PROFIT/NON PROFIT CORPORATION  
BRICKELL 1408 INVESTMENT GROUP, INC.

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

**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: BRICKELL 1408 INVESTMENT GROUP, INC.

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
2475 BRICKELL AVE  
STE: 1407  
MIAMI, FL 33129

Mailing address, if different is:  
2475 BRICKELL AVE  
STE: 1407  
MIAMI, FL 33129

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is: ANY AND ALL LAWFUL PURPOSE

**ARTICLE IV SHARES** 100  
The number of shares of stock is: \_\_\_\_\_

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**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: (P/VP) IAN MAYORAL-PARRACIA  
Address: 2475 BRICKELL AVE  
STE: 1407  
MIAMI, FL 33129

Name and Title: (T) MICHELLE MAYORAL-PARRACIA  
Address: 2475 BRICKELL AVE  
STE: 1407  
MIAMI, FL 33129

Name and Title: (S) JOAQUIN MAYORAL-PARRACIA  
Address: 2475 BRICKELL AVE  
STE: 1407  
MIAMI, FL 33129

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(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: JOAQUIN MAYORAL-PARRACIA  
 Address: 2475 BRICKELL AVE STE: 1407  
MIAMI, FL 33129

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: JOAQUIN MAYORAL-PARRACIA  
 Address: 2475 BRICKELL AVE STE: 1407  
MIAMI, FL 33129

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*I have been named or designated agent to accept service of process for the above stated corporation or the party designated in this certificate, I am familiar with and accept the responsibilities as registered agent and agree to act in this capacity.*

\_\_\_\_\_  
 Required Signature/Registered Agent

1/14/2014  
 Date

*I solemnly swear and affirm that the facts stated herein are true. I am aware that the false information submitted by a document to the Department of State constitutes a third degree felony as provided for in 289.235, F.S.*

\_\_\_\_\_  
 Signature Incorporator

1/14/2014  
 Date