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(((H140000455383)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : BLANCO ACCOUNTING I, INC.

Account Number : 120100000060 Phone : (305)828-1148 Fax Number : (305)828-1709

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

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## FLORIDA PROFIT/NON PROFIT CORPORATION AKIF,INC.

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Help

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

6612 SW 8		Mailing add	ress, if different is:
RTYCLE III Pi e purpose for whic	TRPOSE the corporation is organized is:	AND ALL LAWFUL	BUSINESS
			77
RTTCLE IV SI		 ORS	() es () () () ()
RTICLE V II	TITIAL OFFICERS AND/OR DIRECT	ORS ENT Name and Title:	1
RTICLE V II		ORS  Name and Title:  Address:	() (c) (c) (c) (c) (c) (c) (c) (c) (c) (
RTICLE V 11	ATTAL OFFICERS AND/OR DIRECT itle: 16612 SW 85TH LN	Name and Title:	1
Name and T Address	ATTAL OFFICERS AND/OR DIRECT itle: 16612 SW 85TH LN	Name and Title:Address:	72 TO
Name and T Address	ATTAL OFFICERS AND/OR DIRECT itle: ALBA J HERRERA CUBILLOS PRESIDE 16612 SW 85TH LN MIAMI FL 33193	Name and Title:  Address:  Name and Title:	72 TO
Name and T  Address  Name and Tit	ALBA J HERRERA CUBILLOS PRESIDE  16612 SW 85TH LN  MIAMI FL 33193	Name and Title:  Address:  Name and Title:	125 125 127 128 128 128 128 128 128 128 128 128 128
Name and T Address  Name and Tit Address	ALBA J HERRERA CUBILLOS PRESIDE  16612 SW 85TH LN  MIAMI FL 33193	Name and Title:  Address:  Name and Title:  Address:	
Name and T Address  Name and Tit Address	ALBA J HERRERA CUBILLOS PRESIDE  16612 SW 85TH LN  MIAMI FL 33193	Name and Title:  Address:  Name and Title:  Address:  Name and Title:  Name and Title:	

(conti.)

Name an	d Title:	Name and Title:					
Address		Address:					
		<u></u>					
ARTICLE VI	REGISTERED AGENT						
	orida street address (P.O. Box NOT acceptable) of	the registered agent is:	55				
Name:	ALBA J HERRERA CUBILLOS						
Addr <del>ess</del> :	16612 SW 85TH LANE		25				
	MIAMI FL 33193						
ARTICLE VII	INCORPORATOR		35 35 35 35 35 35 35 35 35 35 35 35 35 3				
The name and ad	dress of the Incorporator is:		SP COLUMN				
Name:	ALBA J HERRERA CUBILLOS	•					
Address:	16612 SW 85TH LANE	•					
	MIAMI FL 33193						
Having been nan this certificate, I	red as registered agent to accept service of process , Im familiar with and accept the appointment as regi	for the above stated corporation a stered agent and agree to act in thi	t the place designated in is capacity				
~ 0k	eauth Leuw	02	2/22/2014				
Y	Required Signature/Registered Agent		Date				
I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State ponstitutes a third degree felony as provided for in s.817.155, F.S.							
_ dent Helice.		0	2/22/2014				
y	Required Signature/Incorporator		Date				