01/30/2032 05:08 #0883 P.001/005 Florida Department of Division of C ations Cove Sheet Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H14000067940 3))) H140000679403ABC+ Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. To: Division of Corporations Fax Number : (850)617-6381 Account Name : LAZARUS CORPORATE FILING SERVICE, INCR From: 20 Account Number : I2000000019 Phone : (305) 552-5973 Fax Number : (305)220-1440 **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 L.V. & ASSOCIATES GROUP CORP.

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ARTICLES OF INCORPORATION

OF

L. V. & ASSOCIATES GROUP CORP.

ARTICLE I

The name of this Corporation shall be:

L. V. & ASSOCIATES GROUP CORP.

ARTICLE II

This Corporation may engage in the transaction of any lawful business for which a Corporation may be incorporated under the Act of State of Florida for Florida Corporation.

ARTICLE III

The maximum number of shares of slook which the Corporation is authorized to have outstanding at any time shall be 500 shares common stock, with a par value of \$1.00 per share.

ARTICLE IV

The shareholders of this Corporation shall have preemptive right in acquire unissued shares of the Corporation or securities of the Corporation convertible into carrying a right to or acquire shares.

ARTICLE V

This Corporation is to have a perpetual existence.

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ARTICLE VI

The principal office of this Corporation shall be allocated at:

60 NW 37 AVE, STE, 904 MIAMI, FL 33125

The corporation retain the power of move its office to any other address in Florida, as may from time to time be determined and authorized by its Board of Director, with branch offices in such other cities or countries.

ARTICLES VII

The Initial registered office of this Corporation shall be et:

60 NW 37 AVE. STE. 904 MIAMI, FL 33125

ARTICLES VIII

The initial registered agent at such address shall be:

JAIRY VERGARA

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ARTICLE IX

This Corporation shall at all times have at least one (1) Director who shall conduct the business of the Corporation as a Board of Directors. The Stockholders of this Corporation may from time to time, and at anytime increase or decrease the size of the Board of Directors of the Corporation. The name and address of initial Board of Directors is:

NAME ANDRES LEONARDI PRESIDENT/DIRECTOR JAIRY VERGARA VICE PRESIDENT/DIRECTOR <u>ADDRESS</u> 60 NW 37 AVE. STE. 904 MIAMI, FL 33125 60 NW 37 AVE. STE.904 MIAMI, FL 33125

ARTICLE X

The name and address of the incorporator is: .

JAIRY VERGARA

60 NW 37 AVE. STE. 904 MIAMI, FL 33125

ARTICLE XI

The By-laws of this Corporation may be created, smended, changed or replace by either the stockholders or the Director of the Corporation at any duly schedule special meeting called for that purpose. I, the undersigned, do hereby subscribe, acknowledge and file these Articles of Incorporation, hereby certify that the facts hereby stated are true correct and according bereto set my hand and seal.

this LO day of Houde 2014 JAIR

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CERTIFICATE OF DESIGNATION REGISTERED AGENT REGISTERED OFFICE

Pursuant to the provisions of section 607,0501, Florida Statutes, the undersigned Corporation, organized under the laws of The State of Florida, submits the following statement in designation the registered office, registered agent, in the Sate of Florida.

1.- The name of the Corporation is:

L. V. & ASSOCIATES GROUP CORP

2.- The name and address of the registered agent and office is: .

JAIRY VERGARA

60 NW 37 AVE. STB. 904 MIAMI, FL. 38125 Signature______ Date__03/20/114

Having been named as registered agent and to accept services of process for the above Stated Corporation at the designated in this cartificate, 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 registered agent.

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Signature ሰን Date