

Electronic Filing Cover Sheet

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To:		~
	Division of Corporations	\sim
	Fax Number : (850)617-6381	PH
From:		ှာ

Account Name : EXPRESS CORPORATE FILING SERVICEMACCOUNT Number : 120000000146

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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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RECENTED APR 22 AND 13 CANASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION CITY WIDE MGMT GROUP, INC.

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

4/2200

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

ARTICLE I NAM The name of the corpora	ME stion shall be: CITY WIDE MO	GMT GROUP,	INC.		
ARTICLE II PRI			address, if different is:		
8300 W FLAGLER ST		-	8300 W FLAGLER ST		
STE: 121-20	01	STE: 121	-201		
MIAMI, FL 3	33144	MIAMI, F	L 33144		
ARTICLE III PUR	POSE the corporation is organized is:	AND ALL LAW	/FUL PURPOSE		
			The Copy		
			IFR 2		
			<u> </u>		
			######################################		
ARTICLE IV SHA	ares stock is: 100	_ _	4.4 SHOULE		
ARTICLE V INT	TIAL OFFICERS AND/OR DIRECTO	RS			
Name and Title	(P) FERNANDO LOPEZ	Name and Title:			
Address	8300 W FLAGLER ST	Address:			
	STE: 121-201				
	MIAMI, FL 33144				
Name and Title	:	Name and Title:			
Address		Address:			
Name and Title	·	Name and Title:	, .		
Address		Address:			
,					

(conti.)

Name and	i Title:	Name and Title:_	
Address		Address: _	
		-	
		. <u>-</u>	
ARTICLE VI	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) or	the registered agen	t is:
Name:	FERNANDO LOPEZ	the registered ages.	
Address:	8300 W FLAGLER ST STE: 121-201	•	
	MIAMI, FL 33144	•	
ARTICLE VII	INCORPORATOR		
The name and ad	dress of the Incorporator is:		
Name:	FERNANDO LOPEZ		
Address:	8300 W FLAGLER ST STE: 121-201	_	
	MIAMI, FL 33144		
Having been nam this certificate, I a	ned as registered agent to accept service of process on familiar with and accept the appointment as reg	for the above state istered agent and a	ed corporation at the place designated in gree to act in this capacity
	(Karlos)		4/21/2014
	Required Signature Aggistered Agent		Date
I submit this docu	umens and affirm that the facts stated herein are Department of State constitutes of third degree felon	true. I am aware t y as provided for in	hat the false information submitted in a s.817.155, F.S.
	(Axidoa)		4/21/2014
	Required Signantes Incorporator		Date