P/4000036289

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SURJECT: 4TUNE	PROFESSIONAL	SOLUTIONS	INC.
ODGECT			

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

closed are an origi	inal and one (1) copy of the ar	ticles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status

ROM:	Julia Greenberg-Aguilar
	Name (Printed or typed)
	1 Radisson Plaza, Suite 800
	Address
	New Rochelle, NY 10801
	City, State & Zip
	877-330-2677
	Daytime Telephone number
	msampaio@oxfordusa.com
	F. mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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

RTICLE I NAM ne name of the corpora		ESSION	AL SC	DLUTIONS INC.
<i>RTICLE II PRI</i> 800 N Feder	NCIPAL OFFICE Principal street address Al Hwy			Mailing address, if different is: N Federal Hwy
101 Building ()	-	101 B	uilding D
Boca Raton, F	FL 33431	•	Boca	Raton, FL 33431
he purpose for which t	POSE the corporation is organized is: Ind Video Professional. In	mport and	d Expo	ort products and solution
he number of shares of Name and Title Address	TIAL OFFICERS AND/OR DIRE	Name # 212 Addre	and Title:	Jose Carlos Kenji Suzuki - Treasure Rua Francisco Cruz 284 # 21 Sao Paulo, Sao Paulo, Brazil 0411709
Name and Title Address	Jose Carlos Kenji Suzuki - Vice Pre Rua Francisco Cruz 284 # Sao Paulo, Sao Paulo, Brazil 0411	Pame Addre		
Name and Title Address	Jose Carlos Kenji Suzuki - Secr Rua Francisco Cruz 284 # Sao Paulo, Sao Paulo, Brazil 0411	212 Addre	·	

Name ar	nd Title:	Name and Title:	
Addres	s	Address:	
ARTICLE VI	REGISTERED AGENT Iorida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	OXFORD MARKETING CONSULTING INC		ender →
Address:	4800 N Federal Hwy # 101D		
	Boca Raton, FL 33431		FILI APR 22 NEGATION
ARTICLE VII			_EDD
The <u>name and a</u>	ddress of the Incorporator is: MyUSAcorporation.com		P 5
Name: Address:	1 Radisson Plaza, Suite 800		
	New Rochelle, NY 10801		
	med as registered agent to accept service of process am familiar with and accept the appointment as reg		
	Required Signature/Registered Agent		Date
	cument and affirm that the facts stated herein are Department of State constitutes a third degree felon		
4/.07	Required Signature/Incorporator	<u>narar</u> com	7/8//9 Date