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**FLORIDA PROFIT/NON PROFIT CORPORATION  
FLIP PARTNERS, INC**

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

## ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt (s) the following Articles of Incorporation.

### ARTICLE I - NAME

The name of the corporation shall be:

FLIP PARTNERS, INC

### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

6291 WILEY STREET  
HOLLYWOOD, FL 33023

### ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

FIVE HUNDRED (500) SHARES OF ONE DOLLAR (\$1.00) PAR VALUE COMMON STOCK

### ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

EINAR VALERDI  
6291 WILEY STREET  
HOLLYWOOD, FL 33023

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**ARTICLE V - INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are) :

EINAR VALERDI 6291 WILEY STREET HOLLYWOOD FL 33023  
REYNALDO LLANES 1349 W 63 ST HIALEAH FL 33012

  
Signature  
Signature**ARTICLE VI - DIRECTOR(S)**

The name, title and address of the office(s) of this corporation shall be:

(President) EINAR VALERDI 6291 WILEY STREET HOLLYWOOD FL 33023

(Vice-President) REYNALDO LLANES 1349 W 63 ST HIALEAH FL 33012

(Secretary) EINAR VALERDI 6291 WILEY STREET HOLLYWOOD FL 33023

(Treasurer) REYNALDO LLANES 1349 W 63 ST HIALEAH FL 33012

(Director) EINAR VALERDI 6291 WILEY STREET HOLLYWOOD FL 33023  
REYNALDO LLANES 1349 W 63 ST HIALEAH FL 33012

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**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED 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 POSITION AS REGISTERED AGENT.

  
Registered Agent Signature  
EINAR VALERDI

DATE: 05/28/14

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