

**Electronic Articles of Incorporation
For**

P14000065009
FILED
August 04, 2014
Sec. Of State
cgolden

LIBERTYSA SPA, INC.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

LIBERTYSA SPA, INC.

Article II

The principal place of business address:

1000 NW 57CT
MIAMI, FL. 33126

The mailing address of the corporation is:

416 91 ST
SURFSIDE, FL. 33154

Article III

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The number of shares the corporation is authorized to issue is:

10

Article V

The name and Florida street address of the registered agent is:

RODRIGO FRITIS
416 91 ST
SURFSIDE, FL. 33154

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: RODRIGO FRITIS

Article VI

The name and address of the incorporator is:

RODRIGO FRITIS
416 91 ST

SURFSIDE, FL , 33154

Electronic Signature of Incorporator: RODRIGO FRITIS

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P
SARA DOBRY
416 91 ST
SURFSIDE, FL. 33154

Title: CEO
RODRIGO FRITIS
416 91 ST
SURFSIDE, FL. 33154

Article VIII

The effective date for this corporation shall be:

07/31/2014

GENERAL AFFIDAVIT

As a resident in the county of Dade within the state of Florida, Rodrigo Fritis personally approached me, the undersigned Notary, and made his/her sworn testimony in a general affidavit, that the following statement is completely factual and true to the best of his/her belief and knowledge.

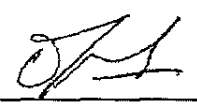
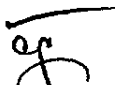
1. I am over the age of 18 and am a resident of the State of Florida. I have personal knowledge of the facts herein, and, if called as a witness, could testify completely hereto.
2. I suffer no legal disabilities and have personal knowledge of the facts set forth below.
3. I have dissolved Libertysa SPA, LLC (doc. Number L 14000120028).
4. I, hereby, declare that I have no intention of revoking such dissolution.
5. I, hereby, release the name Libertysa SPA to be used by a corporation being filed with the following details:
 - Doc Number : W14000047156
 - Entity Name : Libertysa SPA, Inc
 - Tracking Number: 600262883026
 - PIN: 3026

Affiant Signature: 

Date Signed:

the 1st of August 2014Sworn and subscribed to before me on this day, 1 of August 2014

DORA JIMENEZ
Notary Public, State of Florida
Commission #EE48184
My Commission Expires Dec. 12, 2016


Notary Public 8/5/14