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SEP 22 PH 1: 18

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COVER LETTER"

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

SUBJECT: 9057 UWHERS INC.			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	DPY REQUIRED
FROM: Name (Printed or typed)			
18 E. D. LIDO DR			
MIAMI BEACH FL 33139 City, State & Zip			33139
		532 - 4864 elephone number	Sha
	MATTRIGGO E-mail address: (to be use		7
	E-mail address: (to be use	d 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)

The name of the corporation shall be: 93	1 OWNERS INC.	
Principal office Principal street address (8 EA5.7 D-1 L100 DR	Mailing address, if diff	ferent is:
MIAMI BEACH, FL 331	·	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:		
MANY LEGAL FOR P UNDER FLORIDA LA	ROFIT PURPOSE PERMI	TTED
ARTICLE IV SHARES The number of shares of stock is:		14 SEP 22
	RIGGName and Title:	
Address 18 F-AST D	LIDO Aldress:	
Name and Title: BONNIES. K	166 Stame and Title:	
Address 18 EAST DIL MIAMI BEA	DO DR. Address: СН, FL 3139	
Name and Title:	Name and Title:	
Address	Address:	
 		

Name and Title:	Name and Title:		
Address	Address:		
ARTICLE VI REGISTERED AGENT			
The name and Florida street address (P.O. Box NOT acceptab	ole) of the registered agent is:		
Name: MATTHEW V. RIGG			
Address: 18 E. D. Lido DR			
MIAMI BEACH, FL	- 33139		
ARTICLE VII INCORPORATOR			
MITOLES VII MOORE CREATER	€ + 12 F		
The <u>name and address</u> of the Incorporator is:			
Name: MATTHEW V. KI	<u>66</u>		
Address: 18 FAST DI LIDO MIAMI BEACH, D	D_{iR} , $\frac{\pi}{2}$		
MI AMI BEACH D	F(33139		
Having been named as registered agent to accept service of pr	ocess for the above stated corporation at the place designated in		
this certificate, I am familiar with and accept the appointment			
Mart VI I die	9/17/14		
Required Signature/Registered Agent			
I submit this document and affirm that the facts stated herein are true. I am aware that the 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.			
M +++ 11 D.	9/17/17		
Required Signature/Incorporator	7/11/4 Date		
Required Signature/Incorporator	Date		