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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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(Document Number)		
Certified Copies	_ Certificates	s of Status
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TECH MID:50

ACCOUNT NO. : 12000000195
REFERENCE: 416264 7690340
AUTHORIZATION: Spelle Man
COST LIMIT : \$ 17/8.75
ORDER DATE: December 10, 2014
ORDER TIME : 9:17 AM
ORDER NO. : 416264-005
CUSTOMER NO: 7690340
DOMESTIC FILING
NAME: BREAKSCLUSIVE, INC.
EFFECTIVE DATE:
XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Courtney Williams - EXT. 62935

EXAMINER'S INITIALS:

COVER LETTER

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

Break SUBJECT:	sclusive, Inc.		
SUBJECT.	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the art	icles of incorporation and	d a check for:
	S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	& Certificate of Status
		ADDITIONAL CO	OPY REQUIRED
	eorge R. Wentz, Jr., Esq.	e (Printed or typed)	
10	10 Common Street, Suite 2510		
		Address	
Ne	ew Orleans, Louisiana 70112		
•	City.	State & Zip	
50	4-458-7143		
_	Daytime T	elephone number	
gw	ventz@davillierlawgroup.com		
	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 cr	NAME Breaksclusive, Inc. imporation shall be:		
ARTICLE II PRINCIPAL OFFICE Principal street address 3151 East Thomas Street, Unit B		Mailing address. if	different is:
Inverness. Florid			
-			
ARTICLE III The purpose for w	PURPOSE All law hich the corporation is organized is:	ful purposes in accordance with Floric	a Law.
		1/2 7/2	
ARTICLE IV The number of sha			
ARTICLE V	INITIAL OFFICERS AND/OR DIREC		
Name and	Jakob Adolfsson, President, Secr		
Address	Inverness, Florida 34453	Address:	
Name and	Title:	Name and Title:	
Address			
Name and	Title:		
Address			

Name and	i Title:	Name and Title:	
Address		Address:	
ARTICLE VI	REGISTERED AGENT		
The name and Flo	orida street address (P.O. Box NOT acceptable) o		
Name:	Corporation Service Compar	ry	
Address:	1201 Hays Street	_	
	Tallahassee, FL 32301	_	
ARTICLE VII	INCORPORATOR		81.05
The manie and ad	dress of the Incorparator is:		
Name:	George R. Wentz, Jr.		⊕ (
Address:	1010 Common Street, Suite 2510	_	
	New Orleans, Louisiana 70112	_	,
By: By: I submit this docu	Required Signature Registered ASSI. V	givered agent and agree to act in ney Williams ice President true. I am aware that the false	12.18.14 Date Information submitted in a
document to the	Department of State constitutes a third degree felor		12 17 14 Date





December 12, 2014

CORPORATION SERVICE COMPANY

SUBJECT: INFLUENCERS, INC. Ref. Number: W14000074009



We have received your document for INFLUENCERS, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Christine Haney Regulatory Specialist II New Filing Section

Letter Number: 914A00026249