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FLORIDA PROFIT/NON PROFIT CORPORATION
CRUZ OBREGON CORP.

Certificate of Status	0
Certified Copy	1
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(D)

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

ARTICLE I NAME
The name of the corporation shall be: CRUZ OBREGON CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address	Mailing address, if different is:
21 S.W. 15 ROAD	21 S.W. 15 ROAD
SUITE 200	SUITE 200
MIAMI, FLORIDA 33129	MIAMI, FLORIDA 33129

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ARTICLE III PURPOSE
The purpose for which the corporation is organized is: GENERAL PURPOSE

ARTICLE IV SHARES
The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LIZETH GUADALUPE MUNGUIA-D-P
Address: 21 S.W. 15 ROAD, SUITE 200, MIAMI, FLORIDA 33129

Name and Title:
Address:

Name and Title: RAUL ANTONIO BEYRUTI -D-S-T
Address: 21 S.W. 15 ROAD, SUITE 200, MIAMI, FLORIDA 33129

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

(cont.)

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

_____ _____

_____ _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: INAKI SAIZARBITORIA, ESQ.

Address: 21 S.W. 15 ROAD SUITE 200

MIAMI, FLORIDA 33129

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RAUL ANTONIO BEYRUTI

Address: 21 S.W. 15 ROAD SUITE 200

MIAMI, FLORIDA 33129

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

_____ 12-29-14

Required Signature/Registered Agent Date

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.

_____ 12-29-14

Required Signature/Incorporator Date

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