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## FLORIDA PROFIT/NON PROFIT CORPORATION LMC LINK INC

Certificate of Status	0
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JAN 2 3 2015

T. SCOTT

ATX1

LMC LINK INC

## ARTICLES OF INCORPORATION

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

name of the corpo						
TICLE II PRINCI Principal <u>s</u>	IPAL OFFICE treet address		Mailing address, if different is:			
5 SW 123 TERRAC	<u></u>					
	· · · · · · · · · · · · · · · · · · ·			<u></u>		
MI, FL 33156				· <u>-</u> -		
PURPOSE for which		TRANSACTANY AND A	LL BUSINESS PERMITTTED			
	F THE UNITED STATES OF AMERICA	,	•			
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DCLEIV SHARE						
TICLE IV SHARE			·			
number of shares of	<b>53</b>		· ·	15		
number of shares of	ES of stock is: 500 Shares at \$1,00 par			15 ЛА		
number of shares of	ES of stock is: 500 Shares at \$1.00 par OFFICERS AND/OR DIRECTORS LIZETTE MARANON-CANCELA	value .				
number of shares of FICLE V INITIAL Name and Title:	ES of stock is: 500 Shares at \$1,00 par OFFICERS AND/OR DIRECTORS LIZETTE MARANON-CANCELA	valueName and Title:		JAN 22		
number of shares of FICLE V INITIAL Name and Title:	ES of stock is: 500 Shares at \$1.00 par OFFICERS AND/OR DIRECTORS LIZETTE MARANON-CANCELA 8275 SW 123 TERRACE	valueName and Title:		JAJE 2		
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number of shares of TICLE V INITIAL Name and Title:  Address:  Name and Title:	ES of stock is: 500 Shares at \$1,00 par OFFICERS AND/OR DIRECTORS LIZETTE MARANON-CANCELA 8275 SW 123 TERRACE MIAMI, FLORIDA 33156	Name and Title: Address:  Name and Title;		JAN 22 AMII: 8		
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LMC LI	NK INC		(conti.)	ATX1
Name Addres	and Title:	Name and Title:  Address:		
	REGISTERED AGENT  ### STORY   P.O. Box NOT acceptal	ble) of the registered agent is:		
Name:	LIZETTE MARANON-CANCELA	····		
Address:	6275 SW 123 TERRACE	·		15 JAN
ARTICLE VII	MIÁMI, FLORIDA 33156 INCORPORATOR	<del></del>		W 22
The <u>name an</u>	d address of the incorporator is:			
Name:	LIZETTE MARANON-CANCELA	·····		······································
Address:	6275 SW 123 TERRACE	<del></del>		
	MIAMI, FLORIDA 33156			
Having been n to this certific	named as registered agent to accept service of pro- ate, I am familiar with and accept the appointment :	cess for the above stated corporates registered agent and agree to ac	ion at the piece designa at in this capacity	iled
	Required Signature/Registered Agent		1/20/15 Date	
i submit this d document to t	locument and affirm that the facts stated herein are the Department of State constitutes a third degree i	true. I am awere that the false info	ormation aubmitted in a	l
7	Maranon-Cancela	नाजार जन्म क्रायम्भवातं सम्बन्धाः स्वयः ।	1/22/1	5
	Required Signature/Incorporator		Date	