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(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	∍ #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(De	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
		,

Office Use Only



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15 FEB 18 PH 3:5



COVER LETTER

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

SUBJECT: 1001 Emerald Shine Resources, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

\$70.00	□ \$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
Ū	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate
			Status
		ADDITIONAL CO	PY REQUIRED

FROM:	Barrett G. Johnson	
_	Name (Printed or typed)	
	1815 Miccosukee Commons Drive	
-	Address	
	Tallahassee, Florida 32308	
_	City, State & Zip	
	(850) 556-6056	
-	Daytime Telephone number	
	BGJohnsonlaw@aol.com	
-	E-mail address: (to be used 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)

100 SW 300	RINCIPAL OFFICE Principal street address Avenue	Mailing add	dress, if different is:
ami, FL-3			
purpose for whic	RPOSE th the corporation is organized is:		
	ourpose for which this Corpor		
	pusiness for which corporati Florida Statutes, more partic		
number of shares	IARES of stock is: 1000 ITTIAL OFFICERS AND/OR DIRECTOR	_	
number of shares TTCLE V IN Name and Ti	of stock is: TUUU ITTIAL OFFICERS AND/OR DIRECTOR tle:	Name and Title:	
number of shares	of stock is: 1000 ITTIAL OFFICERS AND/OR DIRECTOR	_	SECAL ALLAHASS
number of shares TTCLE V IN Name and Ti Address	of stock is: 1000 ITTIAL OFFICERS AND/OR DIRECTOR tle: Jose Maria Carneiro Da Cunha P/S/T 1900 SW 3rd Avenue	Name and Title:Address:	SECALASSEE
number of shares TTCLE V IN Name and Ti Address	ITTIAL OFFICERS AND/OR DIRECTOR tle: Jose Maria Carneiro Da Cunha P/S/T 1900 SW 3rd Avenue Miami, FL 33129	Name and Title: Address: Name and Title:	15 FED 18 PH 3: 55 SECRETAL ALABASSES FLORIDA
number of shares TTCLE V IN Name and Ti Address Name and Tit Address	ITTIAL OFFICERS AND/OR DIRECTOR tle: Jose Maria Carneiro Da Cunha P/S/T 1900 SW 3rd Avenue Miami, FL 33129	Name and Title: Address: Name and Title: Address:	PH 3:55

ARTICLE VI The name and Fle Name: Address:	REGISTERED AGENT prida street address (P.O. Box NOT acceptable) of Barrett G. Johnson 1815 Miccosukee Commons Drive Tallahassee, Florida 32308	Address:	
The <u>name and Fle</u> Name: Address:	Barrett G. Johnson 1815 Miccosukee Commons Drive	the registered agent is:	
Address:	1815 Miccosukee Commons Drive		
ARTICLE VII	Tallahassee, Florida 32308		
ARTICLE VII			
	INCORPORATOR		
The name and ad	dress of the Incorporator is:		
Name:	Barrett G. Johnson		
Address:	1815 Miccosukee Commons Drive	2	
	Tallahassee, Florida 32308		
Having been nam this certificate, I a	ned as registered agent to accept service of process imfamiliar with and accept the appointment as regional acceptance. Required Signature/Registered Agent	for the above stated corp istered agent and agree to	oration at the place designated in act in this capacity February 18, 2015 Date
I submit this docu document to the L	ument and affirm that the facts stated herein are to pepartment of State constitutes a third degree felong	true. I am aware that the vas provided for in s.817.	false information submitted in a 155, F.S. February 18, 2015
	Required Signature Incorporator		Date

SECHEDAL OF SIME

