

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION CKT NEW STYLE, CORP.

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ARTICLES OF INCORPORATION

H15000056868

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) 15 MAR -5 AM 1: 42 NAME: The name of the corporation is: ARTICLE I SECRETARY OF STATE TALLAHASSEE, FLORIDA CKT CORP NEW ARTICLE II PRINCIPAL OFFICE: The principal street address and mailing address is: 95 ave MIAMI 100 SHARES: The number of shares of stock is: INITIAL DIRECTORS AND/OR OFFICERS: ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS: ARTICLE V The name and Florida street address (PO Box not acceptable) of the registered agent is: ave 33172 iami

INCORPORATOR: The name and address of the Incorporator is: ARTICLE VI errez ave NW

#150000568**68**

Required Signatures:

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 accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent to accept the appointment as registered agent to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the agent age

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.

Incorporator Date

15 MAR -5 AM II: 42 EGGETARY OF STATE ALLAHYSSEE, FLORIDA