Division of Corporations

Florida Department of Stat

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : KRISJOENNA SERVICES, INC.

Account Number: I20080000033

: (305)644-3055

· Fax Number

: (305)644-3052

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

KrisToenna @ yahoo.com

FLORIDA PROFIT/NON PROFIT CORPORATION **GMFOTOVIDEO,INC**

Certificate of Status	1
Certified Copy	1
Page Count -	01
Estimated Charge	\$87.50

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:

GMFOTOVIDEO,INC.

ARTICLE II PRINCIPAL OFFICE

Principal and Mailing street address:

5300 NW 26th AVENUE STE 06 MIAMI, FL 33142

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL REAL ESTATE PURPOSES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Title:

PRESIDENT

Name:

GABRIEL MACHADO

Address:

5300 NW 26th AVENUE STE 06

MIAMI, FL 33142

Title:

VICE-PRESIDENT

Name:

MARTHA IBARRA STE 06

Address:

5300 NW 26th AVENUE

MIAMI, FL 33142

ARTICLE VI REGISTERED AGENT

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

Name:

ENNA DIEPPA

Address

7001 W 35 AVENUE STE 241

HIALEAH, FL 33018

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

GABRIEL MACHADO

Address

5300 NW 26th AVENUE STE 06.

MIAMI, FL 33142

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

Date: APRIL 9, 2015

Required Signature/Registered Agent

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.

Date: APRIL 9, 2015

Required Signature/Incorporator