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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

: (305)552-5973

Phone Fax Number

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Email	Address:		

## FLORIDA PROFIT/NON PROFIT CORPORATION **BLUE WAVE EXPRESS INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

APR 3 0 2015

S. GILBERT

Help

## #2393 P. 002/003

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

ARTICLE I NAME: The name of the corporation is:

BLUE WAVE EXPRESS INC	
ARTICLE II PRINCIPAL OFFICE:	_
The principal street address and mailing address is:  13001 NW 9 LN	15 APR
HIAM. FL 33182	% 29
ARTICLE III SHARES: The number of shares of stock is: 100	AH II: 46
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
JUAN LAZARO QUINTANA (P)	
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	
The name and Florida street address (PO Box not acceptable) of the registered agent is:	
- JUAN LAZARO WUNKIANA	
13001 NW 9 CM	
MIAMI FC 33112	
ARTICLE VI INCORPORATOR; The name and address of the Incorporator is:	
JUAN LAZARO QUINTANA	
13001 NW 9 LN	
MIAMI FL 33182	

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## 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 act in this capacity

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.

(Incomorator

Date