

Florida Department of State

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Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION

Lighthouse Advisory Services Inc.

Certificate of Status	1
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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Lighthouse Advisory Services Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

8869 Marlamoor Lane West Palm Beach, FL 33412

ARTICLE III SHARES

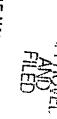
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

200 Shares at no par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Richard Hoffman 8869 Mariamoor Lane West Palm Beach, FL 33412 SECHETALY OF STATE FUNDS



Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940

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ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Richard Hoffman- President/Director 8869 Marlamoor Lane West Palm Beach, FL 33412

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Richard Hoffman 8869 Marlamoor Lane, West Palm Beach, FL 33412

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

12th day of May 20 15

Rìchard Mpfiman

Signature

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE STATE OF FLORIDA. SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Lighthouse Advisory Services Inc
2. The name and address of the registered agent and office is:
Richard Hoffman

Name

8869 Marlamoor Lane

(P.O. Box or Mail Drop Box NOT Acceptable)

West Pairn Beach, FL 33412

(City / State / Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

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SIGNATURE

May 12, 2015 (Date)