

**PIS000048361**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
ALEGBRYAN CORP**

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

JUN 02 2015

T. SCOTT

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15 JUN - 1 PM 1:14

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FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

15 JUN - 1 AM 10:00

**ARTICLES OF INCORPORATION** H15000130717  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)**ARTICLE I NAME:** The name of the corporation is:ALEGBRYAN CORP**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

6300 WEST FLAGLERApt # 9Miami FL 33144**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**P - Jorge Andres Fraga Cabrera  
  
  
  
**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Jorge Andres Fraga CABRERA6300 WEST FLAGLER APT #9Miami FL 33144**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Jorge Andres Fraga Cabrera6300 West Flagler Apt #9Miami FL 33144

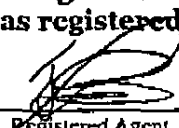
H15000130717

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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 9.817.155, F.S.

  
\_\_\_\_\_  
Incorporator

\_\_\_\_\_  
Date

H15000130717