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To:	Division of Cor	porations	
ے ہے۔	Fax Number	: (850)617-6381	
□From:	Account Name Account Number		<b>产</b>
ro j	Phone	: (305)552-5973	100
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ு **Enter	the email addre	ess for this business entity to be used for	Future .
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## FLORIDA PROFIT/NON PROFIT CORPORATION TABACOS CUBANICA CORP

Certificate of Status	0
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Estimated Charge	\$78.75

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AUG 4 6 2015

S. GILBERT

H1500018981U

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

ARTICLE I NAME: The name of the corporation is:	
TABACOS CLIBANICA CORP	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
- 7234 NW 25 ST Migni, Florida 33122.	
M.GNI, +10 E.DA, 33122.	
ARTICLE III SHARES: The number of shares of stock is:	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
Ivan OLIVARES (P)	
## 55	
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	E. Land
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	
The name and Florida street address (PO Box not acceptable) of the registered agent is:	
Ivan olivares	
7234 NW 255+	
Miami FL 33122	
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:	
Ivan Olivares	
7234 NW 25St	
Miami FL 33122	

- H 150001898 10

Date

## 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
08/01/20/5

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.

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