

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:		ن ﷺ د
*		Division of Corporations	
		Fax Number : (850)617-6381	
	Evan.		=
سة. مارية اليوا	From:	Account Name : FASTKIT CORP	in a
		Account Number: I20100000009	3
9		Phone : (305)599-0839	
		Fax Number : (305)592-9591	

FLORIDA PROFIT/NON PROFIT CORPORATION LOBSTER GOLD Corp.

Email Address:

Certificate of Status	0
Certified Copy	1.
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AUG 14 2015 S. GILBERT ARTICLES OF INCORPORATION 15 AUG 13 AH 10: 39

ARTICLE NAME The name of the corporat	tion shall be: LOBSTER GOLD Corp.	The Late of the State of the St
ARTICLE II PRINC	IPAL OFFICE Principal street address	Mailing address, if different is:
2125 Biscayne Bouleva	rd 580 A	
Miami, Florida 13)37		
ARTICLE HI PURPO The purpose for which the	PSE to transactive corporation is organized is:	any legal business
ARTICLE Y INITIA	Stock is: 100 of \$ 1 par value each LOFFICERS AND/OR DIRECTORS BRUNO Francesco	Name and Title: P/T/S/D
Address	2145 Disamon Davidsonal	Address:
	2125 Biscayne Boulevard Miami, Florida 33137	
Name and Title:		Name and Title:
Address		Address:
Name and Title:	,	Name and Title:
Address		Address:

Name and Title:		Name and Title:	
Address		Address:	
ARTICLE VI REC	<u>DISTERED ACENT</u> 12 street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:		t Ohiman	
Address:	Certified	V. Chiarato Public Accountant	
Augress	Florida 8	Now York States	
		Boulevard - Suite 580 A	L
		, Florida 33187	
ARTICLE VII INC	CORPORATOR		
The name and addre	of the Incorporator is:		
Name:	BRUNO Francesco		
Address:	2125 Biscayne Boulevard 580 A	-	
1,337,-337	Mismí, Florida 33137	- -	
ARTICLE VIII EF		(Atmos) LL	
(If an effective date; days after the filing.	r than the date of filing: is listed, the date must be specific and eann)	ot be more than five busine) 29 days prior or 90 business
Note: If the date inset the document's effect	orted in this block does not meet the applicablive date on the Department of State's records	statutory filing requirements	s, this date will not be listed as
Having been named i this certificate, I am f	os registered agent to accept service of proces amiliar with and accept the appointment as re	gistered agent and agree to d	ation at the place designated in cein this capacity
	Required Signature/Registered Agent		August 13,2015
	Required Signature/Registered Agent		Date
I submit this docume document to the Depa	nt and affirm that the facts stated herein are triment of State constitutes o third degree felo	r (rue.] am aware that the fo ny as provided for in s.817.15	utse information submitted in a '5, F.S.
	Francisco.		August 13, 2015
Required S	Signature/Incorporator		Date