

AUG/20/2015/THU 12:40 PM

FAX No.

P. 001/003

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
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Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
MILLIONARE'S TRADING POST, INC

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

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S. GILBERT

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FAX No.

P. 002/003

FILED

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: MILLIONAIRE'S TRADING POST, INC

SECRETARY OF STATE
DELRWARE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address
19 EAST FLAGLER STREET
MIAMI, FL 33131

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO TRANSACT ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 200 SHARES PAR VALUE EACH \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MICHAEL A. POLLICINO. V.P.

Address: 506 REPUBLIC CT
DEERFIELD BEACH, FL 33442

Name and Title: GIUSEPPE RUSSO. PD.

Address: 1351 W 25RD STREET
MIAMI, FL 33145

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MICHAEL A. POLLICINO
Address: 506 REPUBLIC CT
DEERFIELD BEACH BEACH, FL 33442

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: GIUSEPPE RUSSO
Address: 1351 SW 23RD STREET
MIAMI, FL 33145

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

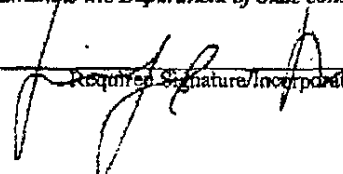
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


Required Signature/Registered Agent

8/17/2015
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.


Required Signature/Incorporator

8/17/2015
Date