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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Division of Corporations  Fax Number : (850)617-6381  From:  Account Name : CORPORATE CREATIONS INTERNATIONAL Account Number : 110432003053  Phone : (561)694-8107  Fax Number : (561)694-1639  ter the email address for this business entity to be used for fur annual report mailings. Enter only one email address please.**  Email Address:  FLORIDA PROFIT/NON PROFIT CORPORATION					to a series	رن حد
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## ARTICLES OF INCORPORATION

ARTICLE I NAME The name of the corporation ARTICLE II PRINCIPA Prin 12901 N.W. 113th Court Medley, FL 33178	LOFFICE	Martine add to at 65 and	
12901 N.W. 113th Court	icinal street address	Martino addino 16 4106 i	
		Mailing address, if different is	<b>S</b> :
ARTICLE III PURPOSE The purpose for which the co	orporation is organized is:	concessions and any other lawful purpose.	
ARTICLE IV SHARES The number of shares of stock ARTICLE V INITIAL O	k is:		
Name and Title: Le	ylani Cardoso - President/Director	/Secretary and Title:	
Address 129	901 N.W. 113th Court	Address:	
Me	dley, FL 33178		
Name and Title: Ma	yra DelValie - VP/Director	Name and Title:	
Address		Address:	
Me	cdley, FL 33178		
		Name and Title:	
Name and Title:			

Name and Title:		Name and Title:		
Addres	3	Address:		
ARTICLE VI	REGISTERED AGENT Torida street address (P.O. Box NOT acceptable) of	f the registered agent is:		
Name:	Corporate Creations Network Inc.	_		
Address:	11380 Prosperity Farms Road, #221E	_		
•••	Palm Beach Gardens, FL 33410	- -		
<u>ARTICLE YU</u>	INCORPORATOR			
The name and s	address of the Incorporator is:			
Name:	Ronald Shapo, Esq Holland & Knight LLP	•		
Address:	701 Brickell Avenue, Suite 3300	_		
	Miami, FL 33131	•		
Effective date, i (If an effective days after the	filing.)	(OPTIONAL) of the more than five business days prior or 90 business estatutory filing requirements, this date will not be listed as		
the document's	effective date on the Department of State's records.	s for the above stated corporation at the place designated in gistered agent and agree to act in this capacity		
-By: Jesi	sica Morales, Special Secretary	6/20/2015		
1 submit dets it	Required Signature/Registered Agent	Date true. I am aware that the false information submitted in a nv as provided for in \$817.155, F.S.		
-		8/20/2015		
Req	uired Signature/Incorporator	Date		