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Florida Department of State

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FLORIDA PROFIT/NON PROFIT CORPORATION ALTAMIRANO HOLDINGS INC

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

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

ARTICLE I NAME ALTAMIRANO HOLDINGS INC
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICEPrincipal street address260 NW 55TH CTMIAMIFLORIDA 33126

Mailing address, if different is:

260 NW 55TH CTMIAMIFLORIDA 33126**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESSES

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES @1.00 PER VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: PRESIDENT EDGAR A ALTAMIRANOAddress: 260 NW 55TH CTMIAMIFLORIDA 33126

Name and Title: _____

Address: _____

Name and Title: SECRETARY MARIA C LEEAddress: 260 NW 55TH CTMIAMIFLORIDA 33126

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: EDGAR A ALTAMIRANO

Address: 260 NW 55TH CT

MIAMI FLORIDA 33126

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: EDGAR A ALTAMIRANO

Address: 260 NW 55TH CT

MIAMI FLORIDA 33126

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 09/21/2015 (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 as the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

X [Signature] _____ 09/21/2015 _____

Required Signature/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 s.817.155, F.S.

X [Signature] _____ 09/21/2015 _____

Required Signature/Incorporator Date

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