

OCT/22/2015/THU 12:21 PM

P. 001

10/22/2015



Florida Department of State  
Division of Corporations  
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FLORIDA PROFIT/NON PROFIT CORPORATION  
US WIRELEZZ, INC

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

15 OCT 22 PM 1:42

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TALLAHASSEE, FLORIDA

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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: US WIRELEZZ, INC**ARTICLE II PRINCIPAL OFFICE**Principal street address13606 SW 144 TERRACEMAIMI, FL 33186

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 @ \$1.00 PAR VALUE**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ALEXANDER MARTINEZ PD.

Name and Title: \_\_\_\_\_

Address 13606 SW 144 TERRACE

Address: \_\_\_\_\_

MIAMI, FL 33186

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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: ALEXANDER MARTINEZAddress: 13606 SW 144 TERRACEMIAMI, FL 33186**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: ALEXANDER MARTINEZAddress: 13606 SW 144 TERRACEMIAMI, FL 33186**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 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*

\_\_\_\_\_  
Required Signature/Registered AgentOct 21 - 15  
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/IncorporatorOct 21 - 15  
Date