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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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STATE DRATIONS

x 10/15

December 2, 2015

Department of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Reference Surfing Minis Inc

Document Number P09000090807

Dear Department:

It has come to my attention that he annual report for my corporation was never renewed since inception. I was never notified nor made aware that this procedure was necessary.

At this time as the President of this corporation I would like to release my florida Document Number 09000090807 for the Corporation Surfing Minis Inc.

Further I am enclosing new articles that I would like for the State Department to process.

Thanking your for your attention to these matters.

Sincerely,

Mark S Cadero

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

| SUBJECT: SURFI | NG MINIS INC | | |
|----------------------|-----------------------------------|-------------------------------------|---------------------------|
| | (PROPOSED CORPORA | ATE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| Enclosed are an orig | ginal and one (1) copy of the art | ticles of incorporation and | d a check for: |
| \$70.00 Filing Fee | · | \$78.75 Filing Fee & Certified Copy | & Certificate o Status |
| | | ADDITIONAL CO | OPY REQUIRED |
| FROM: MA | ARK S CADEO | e (Printed or typed) | |
| 709 | CAPE CORAL PARKWAY WEST | | |
| CA | PE CORAL, FL 33914 | Address | |
| _ | City | , State & Zip | |
| 530 | 0-624-9329 | | |
| | Daytime 1 | Telephone number | |
| MA | ARK.CADERO@GMAIL.COM | | |
| | E-mail address: (to be use | d for future annual report | notification) |

NOTE: Please provide the original and one copy of the articles.

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

| The name of the corpor | uion snaii be: | | | |
|----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ARTICLE II PRINCIPAL OFFICE Principal street address 709 CAPE CORAL PARKWAY WEST | | | Mailing address, if different is: | |
| CAPE CORAL, FL 3: | | 17643 W | 17643 WEST ACAPULCO LANE | |
| | | SUPRIS | E, AZ 85388 | |
| ARTICLE III PURP The purpose for which CONSULTING | OSE the corporation is organized is: | D ALL LAWFUL E | BUSINESS PERTAINING TO | |
| | | | | E S S |
| | | | | 77. 52. |
| | | | i co | _ :0 |
| | | | 2 | 53 33 43 43 43 43 43 43 43 43 43 43 43 43 |
| | | | | |
| | | | •• | 3,5 |
| ARTICLE IV SHAR The number of shares o | stock is: | | : 97 | OBATIONS SIMIE |
| The number of shares o ARTICLE V INITE Name and Title | stock is: AL OFFICERS AND/OR DIRECTORS MARK S CADERO, PRESIDENT e: | Name and Title | | TIONS |
| The number of shares o | stock is: AL OFFICERS AND/OR DIRECTORS MARK S CADERO, PRESIDENT | | CLAUDIA CADERO, VP, SEC, TF 17643 WEST ACAPULCO LANE SUPRISE, AZ 85388 | TIONS |
| The number of shares o ARTICLE V INITE Name and Title | AL OFFICERS AND/OR DIRECTORS MARK S CADERO, PRESIDENT 17643 WEST ACAPULCO LANE SUPRISE, AZ 85388 | Name and Title Address: Name and Title | 17643 WEST ACAPULCO LANE SUPRISE, AZ 85388 | TIONS TES TONE TONE |

| Name a | and Title: | Name and Title: | | |
|-------------------------------------|------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------|-------------|
| Addre | ······································ | Address: | | |
| | | | | |
| | | | | |
| | REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) | of the registered agent is: | | |
| Name: | LAWRENCE SWAN | of the registered agent is. | | |
| Address: | 709 CAPE CORAL PARKWAY WEST | _ | | |
| | CAPE CORAL, FL 33914 | | 긁 |]\ |
| | | | 020 | SE SE |
| • | INCORPORATOR | | ယ် | |
| The <u>name and</u> | address of the Incorporator is: | | | |
| Name: | MARK S CADERO | | AM II: 07 | 739 11.S |
| Address: | 17643 WEST ACAPULCO LANE | | 07 | ATE |
| | SUPRISE, AZ 85388 | _ | | क्र |
| ARTICLE VIII | I EFFECTIVE DATE: | (2000) | | |
| (If an effective days after the | if other than the date of filing: adde is listed, the date must be specific and can filing.) | not be more than five business days p | orior or 90 busi | ness |
| | te inserted in this block does not meet the applicab effective date on the Department of State's record | | te will not be list | ted as |
| | amed as registered agent to accept service of proce I am familiar with and accept the appointment as i | | | ated in |
| | Emerical L | 12/2 | /2015 | |
| Required Signature/Registered Agent | | | Date | |
| | ocument and affirm that the facts stated herein a e Department of State constitutes a third degree fel | | rmation submitt | ed in a |
| Mars | Contor | | 2/2015 | |
| Req | uired Signature/Incorporator | | Date | |