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Florida Department of State
Division of Corporations
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To: Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
CUNHA, INC.**

Certificate of Status	0
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G. McLEOD

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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: CUNHA, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

35 NE 40TH ST, 3 FLOOR

MIAMI FL, 33137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real State

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lutz Cunha PRESIDENT

Address: 35 NE 40TH ST, 3 FLOOR

MIAMI FL, 33137

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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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: Luiz Cunha
Address: 35 NE 40TH ST, 3 FLOOR
MIAMI, FL 33137

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Luiz Cunha
Address: 35 NE 40TH ST, 3 FLOOR
MIAMI, FL 33137

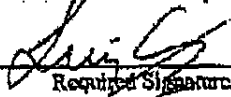
ARTICLE VIII EFFECTIVE DATE:

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

12/16/15

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/Incorporator

12/16/15

Date