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FLORIDA PROFIT/NON PROFIT CORPORATION NEW BEGINNING FINANCIAL CORP

Certificate of Status	0
Certified Copy	1
Page Count	02
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JAN 0 8 2016

T. SCOTT

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

ARTICLE I NAME The name of the corporat	NEW BEGINNING FIN	IANCIAL CORP	
ARTICLE II PRINC	IPAL OPFICE Principal <u>street</u> address		Mailing address, if different is:
MIAMI, FL 33183		<u></u>	
OR ALL LAWFUL AC	SE 10 corporation is organized is: 11 THE CONTROL OF BUSINESS PERMITS 12 OF FLORIDA, OR ANY OTHER	ED UNDER THE LAY	
			5
ARTICLE IV SHARI The number of shares of ARTICLE V INITIA	stock is:	5	
Name and Title		Name and Title	ELIZABETH F. GONZALEZ,
Address	PRESIDENT AND DIRECTOR	Address:	Secretary, Treasurer and Director
	13951 SW 66TH ST.#806A MIAMI, FL 33183		13951 SW 66TH ST.#806A MIAML, FL 33183
Name and Title		Name and Title	•
Address		Address:	
		_/	
Name and Title		Name and Title	*
Address		Address:	
			

Name a	nd Title:	Name and Titlo:
Addres	9	Address;
A Promotelli William	Name of Children	
	<u>REGISTERED AGENT</u> Horida street address (P.O. Box NOT accepts	able) of the registered agent is:
Name:	HENRY NUNEZ	
Address:	13951 SW 66TH ST.#806A	
	MIAMI, FL 33183	
ARTICLE VII	INCORPORATOR	
	address of the Incorporator is:	
Name:	HENRY NUNEZ	
Address:	13951 SW 66TH ST.#806A	
	MIAMI, FL 33183	
ARTICI F VIII	EFFECTIVE DATE:	
Effective date, if	f other than the date of filing:	(OPTIONAL)
(If an effective days after the fi	date is listed, the date must be specific and	cannot be more than five business days prior or 90 business
Note: If the date	e inserted in this block does not meet the appl	icable statutory filing requirements, this date will not be listed as
the document's a	effective date on the Department of State's rec	ords.
Having been na	med as registered agent to accept survice of p	rncess for the above stated corporation at the place designated i as registered agent and agree to act in this capacity
	~ 100	
	Jeny rung	01-06-20
	Required Signature/Registered Agen	
I submit this do document to the	cument and affirm that the facts stated herei Department of State constitutes a phird degree	n are true. I am aware that the false information submitted in .e. felony as provided for in s.817.155, P.S.
<u></u>	6 romant	01-06-20
V	, — , J	1/1 44 1/6 - 7 1/4

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