

PI60000026924

(Requestor's Name)

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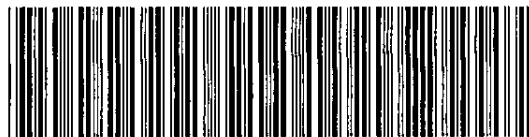
(Business Entity Name)

(Document Number)

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MAR 25 2016

T SCHROEDER

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: 3/25 GLINDA

XX **CERTIFIED COPY**

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ARTICLES

1. SFERONE, INC.

(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

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: SFERONE, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

407 Lincoln, Suite 701

Miami Beach, FL 33139

ARTICLE III PURPOSE

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

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Nino AMOR, Director

Address: 11900 W. Olympic Blvd., Ste. 570
Los Angeles, CA 90064

Name and Title: Aymeric KEMPFT, Director

Address: 11900 W. Olympic Blvd., Ste. 570
Los Angeles, CA 90064

Name and Title: Nino AMOR, President

Address: 11900 W. Olympic Blvd., Ste. 570
Los Angeles, CA 90064

Name and Title: Nino AMOR, Secretary

Address: 11900 W. Olympic Blvd., Ste. 570
Los Angeles, CA 90064

Name and Title: Nino AMOR, Treasurer

Address: 11900 W. Olympic Blvd., Ste. 570
Los Angeles, CA 90064

Name and Title: _____

Address: _____

16 MAR 25 PM 3:12

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: Romain ANGELETTI
Address: 407 LINCOLN, Suite 701
Miami Beach, FL 33139

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Laurent C. Vonderweidt
Address: 11900 W. Olympic Blvd., Ste. 570
Los Angeles, CA 90064

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U.S. DEPARTMENT OF JUSTICE

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

3/7/2016
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

03/07/2016
Date